

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of Residents who responded that they would recommend this home to others	C	% / LTC home residents	In-house survey / 2023	88.50	90.00	Will improve on current target and continue to exceed Extencicare's target	

Change Ideas

Change Idea #1 Review the Resident Satisfaction Survey yearly and create an action plan for low scores using feedback and input from Resident's Council.

Methods	Process measures	Target for process measure	Comments
Initiate action plan on low performing targets from the resident satisfactions survey. Monitor quarterly progress, to be implemented by end of April 2024.	# of action plan successful implemented on quarterly reports.	Action plans will be 100% fully implemented by end of June 2024.	

Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents who responded positively to "If I have a concern my concerns are addressed in a timely manner."	C	% / LTC home residents	In-house survey / 2023	52.00	85.00	Meet Extendicare's target.	

Change Ideas

Change Idea #1 Will focus on Extendicare's policy for addressing concerns and following through with process.

Methods	Process measures	Target for process measure	Comments
Prompt communication with resident to address resolution of concern and will be logged on the home's internal status report. Where appropriate document in the resident's chart. Staff monthly meetings with agenda item on progress of addressing concerns.	# of concerns and their resolution will be documented in the resident's chart. # of concerns logged into the home's internal status report. # of monthly meeting to include home's progress with with concerns.	100% fully implemented by end of June, 2024.	Reports, documentation and monthly meetings addressing concerns will be 100% fully implemented by end of June, 2024.

Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents responding positively to "I am updated regularly about any changes in my home."	C	% / LTC home residents	In-house survey / 2023	53.80	85.00	Will meet Extencicare's target by end of year.	

Change Ideas

Change Idea #1 To provide enhanced opportunities for sharing and receiving information from residents to keep them updated on changes.

Methods	Process measures	Target for process measure	Comments
1.Resident will be provided with a quarterly newsletter, will start in April 2024. 2.Residents will be encouraged to take part in staff huddles that relate to changes occurring within the home, will start implementing in April 2024. 3.Weekly interviews with 2 residents to be conducted by the Leadership team will start in April 2024.	# of weekly discussion with residents by leadership and tracked by Surge Learning survey. # of staff huddles residents were invited to attend. Quarterly newsletter will start in April 2024	Discussions, huddles and newsletters will be 100% implemented by the end of April 2024.	

Measure - Dimension: Patient-centred

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of positive Family responses to "I would recommend this home to others".	C	% / Family	In-house survey / 2023	95.70	98.00	We will continue to exceed Extendicare's target	

Change Ideas

Change Idea #1 Increase collaboration with Family Council on the survey results gathering feedback to improve on the low survey scores

Methods	Process measures	Target for process measure	Comments
Seek feedback from family council members quarterly and as needed on areas of suggested improvement. Implement improvements based on feedback as able.	# of suggestions made by family. # of implemented suggestions. # of family councils meeting attend and discussion of action plan.	There will be an increase in family collaboration and feedback on action plan to increase target rate by end of September.	

Measure - Dimension: Patient-centred

Indicator #5	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of Families responding positively to the question "I am satisfied with the quality of cleaning within the resident's room"	C	% / Family	In-house survey / 2023	65.20	85.00	Corporate target	

Change Ideas

Change Idea #1 A project team will audit cleanliness of the residents rooms and follow up with the staff. A fluorescent marking fluid will be included as part of the audit.

Methods	Process measures	Target for process measure	Comments
<p>1.This project will include IPAC, Environmental and Program Managers to conduct the monthly audits on resident's rooms. Every housekeeping staff and resident service aids will be audited monthly on one resident room.</p> <p>2. Will present audit findings to the resident and family council meetings and seek feedback.</p>	<p># of monthly audits completed and to be 80% or more for met items on the audits. # of family and resident council meeting attended with feedback.</p>	<p>100% of the audits will be completed and satisfactory by end of September. Nine residents and family councils meetings will have the results for the audits presented to them by end of 2024.</p>	

Measure - Dimension: Patient-centred

Indicator #6	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of families who responded positively to "The resident has input into the recreation programs available"	C	% / Family	In-house survey / 2023	37.50	85.00	Meet Extendicare's target	

Change Ideas

Change Idea #1 Increase communication and provide opportunities for input into planning of recreational activities by including residents in monthly activity planning group. This change idea will also incorporate the survey results for Spiritual Care services and schedule timing.

Methods	Process measures	Target for process measure	Comments
<p>1.Seek feedback from residents monthly at their resident council meetings and from famies at the Town hall meetings.</p> <p>2.Encourage resident's participation in the monthly Activity Planning group.</p> <p>3.The home's leaders will use Surge's survey tool to seek resident's feedback/input and visit two residents per week.4. Include Activities in quarterly newsletter, include resident participation in activity planning group and highlight spiritual care services.</p>	<p># of suggestions and implemented activities from the Monthly Activity Planning. # of quarterly newsletters and follow up Townhall meetings. Two Surge Learning surveys per week will be completed by leadership team. # of suggestions from family regarding spiritual care services.</p>	<p>Monthly activity planning group, quarterly newsletters to also include spiritual care services and weekly surveys will be 100% implemented by end of April.</p>	

Measure - Dimension: Patient-centred

Indicator #7	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents who are satisfied with the quality of care from doctors.	C	% / Residents	In-house survey / 2024	44.00	80.00	We will meet Extendicare's target	Physicians, Nurse Practitioner

Change Ideas

Change Idea #1 Full-time nurse practitioner onboarded in March 2024 to assist with workload of physician. This will allow the physician additional time to visit and meet with the residents on their weekly visits. Ongoing communication and clarification to residents at their monthly council meeting regarding the roles and expectations of the physician and nurse practitioner.

Methods	Process measures	Target for process measure	Comments
Communication at residents' council monthly meetings to be implemented by end of May 2024. Weekly discussion with leadership and resident to identify any concerns with quality of care from doctors. To start in April 2024.	# of monthly resident council meeting discussion. # of weekly discussions with residents by the leadership team.	Monthly council meetings and weekly discussions will be 100% implemented by end of April 2024.	

Safety

Measure - Dimension: Safe

Indicator #8	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of LTC home residents who fell in the 30 days leading up to their assessment	O	% / LTC home residents	CIHI CCRS / July 2023–September 2023 (Q2 2023/24), with rolling 4-quarter average	7.71	7.00	Improve target rate and continue to exceed Extendicare's target rate.	Achieva, Nurse Practitioner, Medisystem - Pharmacist

Change Ideas

Change Idea #1 Continue to exceed in meeting Extendicare's target rate of 15%

Methods	Process measures	Target for process measure	Comments
1. Weekly high risk falls meeting with the Interdisciplinary Team to review resident's who have fallen. Review opportunities for new interventions and plan of care is reflective of resident's needs. 2. Continue with monthly fall meetings in collaboration with external partners. Seek any new opportunities.	# of monthly meetings with partners in care, capture changes interventions and new opportunities # weekly high risk fall meeting with change in residents' plan of care. # of new opportunities will be captured in weekly and monthly meetings.	Weekly high risk meeting and monthly committee meeting will be 100% fully in place by end of April, 2024.	

Measure - Dimension: Safe

Indicator #9	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment	O	% / LTC home residents	CIHI CCRS / July 2023–September 2023 (Q2 2023/24), with rolling 4-quarter average	15.34	14.50	To improve and continue to exceed Extencicare's target.	Medisystem- pharmacy, Nurse Practitioner, Achieva, BSO, Royal Ottawa Hospital- psychogeriatric nurse

Change Ideas

Change Idea #1 Continue to exceed Extencicare's target rate by maintaining current processes.

Methods	Process measures	Target for process measure	Comments
1. Include external partners to discuss any opportunities and non pharmacological interventions. 2. Monitor the use of antipsychotic medication regardless of exclusion from MDS. 3. Meet monthly with Interdisciplinary team to evaluate reduction, progress and continuance of decreasing dosage.	# of opportunities and non pharmacological interventions used. # of resident with the use of antipsychotic # of resident who successfully were reduced and removed from the use of antipsychotic.	Monitoring opportunities and successful reduction will be 100% fully implemented by end of April 2024.	

Measure - Dimension: Safe

Indicator #10	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
% of LTC residents with restraints	C	% / LTC home residents	Other / Q3 Oct-Dec 2023	1.04	1.00	Continue to exceed Extendicare's target	Achieva, Nurse Practitioner

Change Ideas

Change Idea #1 Will continue to exceed Extendicare's target with current process.

Methods	Process measures	Target for process measure	Comments
1. Discussions with families/residents about risks of restraint use and available alternatives during admissions and at IDTC's. 2. Review restraints and PASD's at monthly Falls Committee meetings to ensure that all interventions are in place and appropriate in their care plans	# of restraint and PASD used monthly. # of request for restraints and discussion had with families/resident will be shared at monthly Restraint/Fall committee.	Monitoring restraints, PASD and the number of request for restraints will be 100% implemented by end of April 2024.	

Measure - Dimension: Safe

Indicator #11	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
% of LTC residents with worsened ulcers stages 2-4	C	% / LTC home residents	Other / Q3 Oct- Dec 2023	1.04	1.00	Continue to Exceed Extendicare's target.	3M, Nurse Practitioner, Achieva, Dietician

Change Ideas

Change Idea #1 Will continue to exceed Extendicare's target by maintaining current successful processes.

Methods	Process measures	Target for process measure	Comments
1. The Nurse Practitioner will work with the SWAN trained nurse. Meet monthly to review underlying cause to pressure injuries and determine treatment plan for preventative measure such as referrals and new equipment. 2. Identify residents at high risk of pressure injuries with the use of the PURS assessment and plan for preventative measures.	# of residents at high risk and have preventative measures in place. # of monthly meetings where treatment plan that included referrals and new equipment.	Monthly meeting in collaboration with the Nurse Practitioner will fully include high risk residents, referrals and any new equipment by end of April 2024.	