

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident experience: Overall satisfaction Percentage of residents who would recommend this home to others	C	% / Residents	In-house survey / 2023	88.50	88.50	Continue to perform better than Extendicare Target of 85%	

Change Ideas

Change Idea #1 Will maintain current performance of above corporate average by participating in Resident Council meetings to obtain feedback from residents on overall satisfaction.

Methods	Process measures	Target for process measure	Comments
Administrator to request invitation as a standing agenda item to request feedback from residents on overall satisfaction, address concerns, communicate updates directly to the council.	# of resident council meetings attended each month # of feedback received from residents	Resident council meetings provide feedback on satisfaction of residents and gives Administrator opportunity to improve regularly by June 1, 2024	

Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I have input into the recreation programs available	C	% / Residents	In-house survey / 2023	64.00	70.00	Home specific target	

Change Ideas

Change Idea #1 Increase resident participation in program planning by implementing a new monthly activity planning session on each unit

Methods	Process measures	Target for process measure	Comments
Each month, there will be a designated activity on each unit where the program staff will include the residents in program planning	resident attendance at program planning activity	Increase resident attendance at program planning activity by May 1, 2024	

Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I am updated regularly about any changes in my home	C	% / Residents	In-house survey / 2023	66.70	75.00	Home Specific Target	

Change Ideas

Change Idea #1 Send new monthly email to families and residents of updates within the home

Methods	Process measures	Target for process measure	Comments
Implement monthly email communication from management to all residents and families on updates within the home.	number of emails sent in a month	Improved communication system to alert residents and families of changes in the home by April 1, 2024	

Change Idea #2 Post updates in the home on mobile whiteboards at the main lobby

Methods	Process measures	Target for process measure	Comments
Obtain updates from the management team and post the updates on portable whiteboards within the home for residents and families to read	number of posted updates in a month	Improved communication system to alert residents and families of changes in the home by April 1, 2024	

Measure - Dimension: Patient-centred

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I have the opportunity to provide input on food and beverage options	C	% / Family	In-house survey / 2023	33.30	85.00	Home specific target	

Change Ideas

Change Idea #1 Increase input from families on food and beverage options

Methods	Process measures	Target for process measure	Comments
Dietary manager will request input from families during 6 week and annual care conference on food and beverage options	# of care conferences held with discussion around input from families	Formalize process for obtaining input from families by June 1, 2024	

Safety

Measure - Dimension: Safe

Indicator #5	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	17.24	15.00	Extendicare Target	Achieva, Behavioural Supports Ontario

Change Ideas

Change Idea #1 Verify coding accuracy and quality checks with RAI coordinator

Methods	Process measures	Target for process measure	Comments
Monthly check in and review of fallers at the Quality meeting to verify coding accuracy	# of completed assessment coding verification	Improve on accuracy of actual falls being coded monthly by June 1, 2024	

Measure - Dimension: Safe

Indicator #6	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	10.59	10.00	Continue to perform better than Extendicare target of 17.3%	Medisystem Pharmacy, Behavioural Supports Ontario

Change Ideas

Change Idea #1 Maintain current performance better than the corporate target by verifying coding accuracy and quality checks with RAI coordinator

Methods	Process measures	Target for process measure	Comments
Monthly check in and review of residents triggered for being given antipsychotic medication in the 7 days preceding their resident assessment at our Quality meeting	# of completed assessments for coding verification	Improve on coding accuracy of actual residents prescribed anti psychotic medications by June 1, 2024	

Measure - Dimension: Safe

Indicator #7	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of long-term care home residents in daily physical restraints over the last 7 days	C	% / Residents	Other / Q3 2023	0.00	0.00	Continue to perform better than Extendicare target of 2.5%	Achieva

Change Ideas

Change Idea #1 Maintain current performance of zero restraints by assessing applications to our waitlist prior to admission

Methods	Process measures	Target for process measure	Comments
Social Service Worker will assess applications for clients with restraints and work with H&CSS to eliminate the restraint before admission to the home.	# of applications with restraints that were reviewed and discussed with HCSS	formalized process for assessing applications to our waitlist and eliminating restraints prior to admission in place by April 1, 2024	

Measure - Dimension: Safe

Indicator #8	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of long-term care home residents who developed a stage 2 to 4 pressure ulcer or had a pressure ulcer that worsened to a stage 2, 3 or 4	C	% / Residents	Other / Q3 2023	5.08	2.00	Extendicare target	3M Canada, NSWOC

Change Ideas**Change Idea #1** Verify coding accuracy and quality checks with RAI coordinator

Methods	Process measures	Target for process measure	Comments
Monthly check in and review of assessment and coding accuracy for wounds at Quality meeting	# of completed assessments for coding verification # of coding errors corrected from review of assessment	Improve on coding accuracy of actual worsening stage 2 to 4 pressure ulcers and process for quality checks by June 1, 2024	

Change Idea #2 Implementing preventative measures for offloading for high-risk residents

Methods	Process measures	Target for process measure	Comments
1) Look at higher risk residents likely to develop pressure injury based on PURS score at monthly quality meeting 2) Provide appropriate equipment for offloading based on assessment	# of high-risk residents likely to develop pressure injury # of high-risk residents assessed to receive appropriate equipment for offloading monthly	Standardized process for implementing preventative measures for offloading in place by July 1, 2024	