

## Experience

### Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I am satisfied with the quality of cleaning in the residents rooms	C	% / LTC home residents	In-house survey / 2024	56.30	73.30	We at the home level feel that this can be improved by increasing audits and education within the environmental services department.	

### Change Ideas

Change Idea #1 Create and continue a schedule for auditing the sanitation of 10% of resident rooms each month, with a target of 90%

Methods	Process measures	Target for process measure	Comments
1) Hold re-education sessions for support services staff including the policy for cleaning resident rooms and washrooms, as well as chemicals and what they are used for. 2) Keep track of those who attend re-education sessions. 3) Audit post education to see if improvement monthly.	Track the number of education sessions held for support service staff and topics that were covered at each meeting. 2) Track the number of support service staff that attended the education by creating an education sign off. 3) Track the number of resident room sanitation audits and their compliance results post education sessions.	1) Education sessions for housekeeping staff will be held by April 30, 2025. 2) 100% of support service staff will attend by April 30th, 2025. 3) Audit results will show an average compliance level between 90-95%.	

**Measure - Dimension: Patient-centred**

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Communication from home leadership (Administrator, Executive Director, and managers) is clear and timely.	C	% / LTC home residents	In-house survey / 2024	71.00	81.00	We at the home level aim to improve our communication and feel that we can do better than current measure.	

**Change Ideas****Change Idea #1** Increase ways we communicate with resident and families

Methods	Process measures	Target for process measure	Comments
1) Track the number of emails and monitor the feedback received. 2) Review communications at family council meetings and actions to address	#of emails with updates about home the number of feedback and positive outcomes received #of times communications were reviewed at family council and action to address.	We will start process for communicating changes via email by June 30, 2025 Tracking of emails and monitoring feedback will begin by July 1, 2025	

**Measure - Dimension: Patient-centred**

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I am satisfied with the schedule of recreation programs	C	% / LTC home residents	In-house survey / 2024	70.00	80.00	We continue to strive to meet the needs and preferences of our residents. We have improved over the last 2 years; however, we feel that this is an important measure to improve on.	

**Change Ideas**

Change Idea #1 When meeting to discuss availability of recreational programs we can discuss scheduling of recreational programs.

Methods	Process measures	Target for process measure	Comments
1) Discussion related to time of programs to be added when doing monthly calendar meetings. 2) Survey residents for feedback 3) Review survey results at resident council 4) implement changes based on feedback	# of surveys sent # of survey responses received # of resident council meetings attended to discuss results # of changes implemented based on feedback	Survey of resident regarding program times will be completed by July 31, 2025, Attendance at resident council to discuss results by August 30, implement changes discussed by Sept 30, 2025	

## Safety

### Measure - Dimension: Safe

Indicator #4	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 1 to Sep 30, 2024 (Q2), as target quarter of rolling 4-quarter average	16.48	15.00	Extendicare target	Achieva, Behavioural Support Ontario

### Change Ideas

Change Idea #1 Enhance lighting at bedside and in bathrooms for residents who fall between 7pm-7am

Methods	Process measures	Target for process measure	Comments
1) Falls team will review data and analyze for residents who would benefit from enhanced lighting at bedside/bathroom 2) install lighting as per assessment 3) Evaluate results	# of residents identified as benefiting from enhanced lighting. # of light installed at bedside/bathroom % improvement in fall rates post lighting enhancement	Residents will be reviewed for enhanced lighting by end of third quarter There will be a 25% improvement in fall rates post lighting by December 2025	

**Measure - Dimension: Safe**

Indicator #5	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 1 to Sep 30, 2024 (Q2), as target quarter of rolling 4-quarter average	14.18	12.00	Continue to improve and be below Extendicare benchmark.	Medisystem, Behavioural Support Ontario, GPA

**Change Ideas**

Change Idea #1 GPA training for responsive behaviours related to dementia.

Methods	Process measures	Target for process measure	Comments
Engage with certified GPA coaches to roll out home level education. 2) register staff for education sessions	# of GPA sessions provided 2) # of staff participating in education	GPA education will be provided for staff by September 2025	

**Measure - Dimension: Safe**

Indicator #6	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	% / LTC home residents	Other / Oct-Dec 2024	2.94	2.00	Extendicare target	

**Change Ideas**

Change Idea #1 Implement per unit tracking for all pressure injuries to measure status and trends of pressure injuries in the home.

Methods	Process measures	Target for process measure	Comments
1) Provide tracking tool on each unit 2) Wound care lead to collect tools and complete analysis for trends	1) # of reviews completed 2) # of tracking tools that were reviewed on a monthly basis	1) tracking tools will be correctly completed monthly by July 2025 2) Analysis will be completed by wound lead by August 2025	