

## Experience

## Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I am satisfied with the variety of food and beverage options.	C	% / LTC home residents	In house data collection / 12 month period	54.40	70.00	Corporate target	

### Change Ideas

Change Idea #1 1. Increase the type and variety of food and beverage options available in the resident menu

Methods	Process measures	Target for process measure	Comments
1. Recognize national food days that occur throughout the year. 2. At monthly food committee discuss breakdown of protein options so residents are aware of options available 3. Review popular options from previous menu and feedback on the options 4. Continue with regular agenda item of asking resident's suggestions for food items they want to see on the menu for food committee meetings.	# of national food days /month # of times protein option discussed at food committee # of different options provided monthly	the type and variety of food and beverage options available in the resident menu will be in place by March 2024	

Change Idea #2 Increase opportunities for residents to provide more input into food and beverage options on the menu

Methods	Process measures	Target for process measure	Comments
Implement a monthly Resident choice menu based on input by residents for food and beverage options.	# of times/month resident choice menu occurred # of suggestions provided by residents monthly	Increased opportunities for residents to provide more input into food and beverage options on the menu will be implemented by April 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	% / LTC home residents	In house data collection / 12 month period	58.90	70.00	Corporate Target	

## Change Ideas

Change Idea #1 1. Increase resident involvement in providing activity program ideas and types of programs they would like to participate in

Methods	Process measures	Target for process measure	Comments
1. Implement suggestion box. 2. Continue to schedule quarterly Program Planning activities. 3. Monthly Resident Council Agenda-Continue to ask for Activity suggestions. 4. Completion of Program Specific survey at Residents' Council and during 1:1 visits. 5. Include prompt in the monthly newsletter with ways to provide suggestions	# of residents who provide suggestions # of resident council meetings where activity suggestions were asked # of resident suggestions implemented	There will be increased resident involvement in providing activity program ideas and types of programs they would like to participate in by April 2024	

## Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I have an opportunity to provide input on food and beverages.	C	% / Family	In house data collection / 12 month period	56.30	70.00	Corporate Target	

### Change Ideas

Change Idea #1 1.Provide information at Townhall and Newsletters for families to provide input into food and beverage choices for resident menu.

Methods	Process measures	Target for process measure	Comments
1.Provide slideshow explaining menu process, options available and residents provide feedback at dining committee and at townhall meetings. 2.Newsletter to include special theme menus 3.email survey to family distribution list	# of family members /residents attending townhall # of times menu process and options discussed at dining committee 1 column/month	Information will be provided for families on how to provide input into food and beverage choices by April 2024	

Change Idea #2 Survey will be developed and sent to families for feedback on food and beverages on resident menu.

Methods	Process measures	Target for process measure	Comments
Develop survey and make available for families to provide input. Collect responses and action feedback as appropriate.	# of surveys sent monthly # of family responses received # of responses that were implemented	A survey will be developed and sent to families for input on food and beverages on resident menu by April 2024	

**Measure - Dimension: Patient-centred**

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
The resident has input into the recreation programs available.	C	% / Family	In house data collection / 12 months prior	56.40	70.00	Corporate target	

**Change Ideas**

Change Idea #1 1.Increase family awareness of all opportunities for residents and family to provide input into recreation programs

Methods	Process measures	Target for process measure	Comments
1.Implement Suggestion box. 2.Continue to schedule quarterly Program Planning activities. 3.Include prompt in the monthly newsletter with ways to provide suggestions.	# of residents and families who provide suggestions # of suggestions that are implemented monthly	Family awareness of all opportunities for residents and family to provide input into recreation programs will be increased by April 2024	

**Measure - Dimension: Patient-centred**

Indicator #5	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents who would recommend this home to others	C	% / LTC home residents	In house data collection / 12 months prior	76.10	85.00	Corporate target	

**Change Ideas**

Change Idea #1 1. Work with resident's council and OARC to ensure council is engaged and effective in all aspects of care in home.

Methods	Process measures	Target for process measure	Comments
1. Partner with OARC to provide support for resident council. 2. Continue to involve resident council in decision making in the home	#of concerns from resident's council monthly # of resident complaints in home monthly	100% engaged with OARC and Residents Council by September 2024 0 concerns from residents council monthly 0 complaints from residents in home monthly	

**Measure - Dimension: Patient-centred**

Indicator #6	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of families who would recommend this home to others	C	% / LTC home residents	In-house survey / 12 months prior	81.40	85.00	Corporate target	

**Change Ideas**

Change Idea #1 1. New informational newsletter will be created for residents and families- all departments will submit article. 2. Continue to work on creating family council in the home

Methods	Process measures	Target for process measure	Comments
Staff will continue with effective communication with residents, families, and interdisciplinary team members minimum monthly (through a new updated newsletter, memos etc.) Newsletter will continue to recruit for family council.	Total number of family members receiving communication from home (minimum 1x a month) # of complaints received from families monthly # of family members interested in forming a family council	100% of families who have provided us with personal emails will receive communication from the home. 0 complaints received from families monthly. Family council formed.	

## Safety



**Measure - Dimension: Safe**

Indicator #7	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	13.85	10.00	Corporate target is 15% but working to continually improve results.	Achieva

**Change Ideas**

Change Idea #1 1.Implement specific activity program at afternoon change of shift for residents who are high risk for falls.

Methods	Process measures	Target for process measure	Comments
1.Review current high-risk residents for falls to identify their needs/preferences for activities. 2. Implement program during afternoon change of shift to engage residents and prevent falls	# of residents reviewed for activity needs/preferences weekly # of activity programs that occur during change of shift in afternoon weekly	Specific activity program at afternoon change of shift will be implemented and in place by June 2024	

Change Idea #2 Conduct environmental assessments of resident spaces to identify potential fall risk areas and address areas for improvement

Methods	Process measures	Target for process measure	Comments
1. Staff to do environmental assessments for all residents at high risk for falls at minimum monthly. 2.Address any identified deficiencies from completed assessments	# of environmental assessments completed monthly # of identified deficiencies from assessments that were corrected monthly	Environmental risk assessments of resident spaces to identify fall risk will be completed by June 2024	

**Measure - Dimension: Safe**

Indicator #8	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	16.21	11.00	Corporate target is 17.3% but working to continually improve results.	Medisystem

**Change Ideas**

Change Idea #1 1. Medication reviews will be completed for all residents currently prescribed antipsychotics to develop plan for deprescribing as appropriate.

Methods	Process measures	Target for process measure	Comments
1) Review all residents who are currently prescribed antipsychotics 2) Review plan of care for supporting diagnosis 3) If no diagnosis, team will review and implement reduction strategy process	# of residents reviewed monthly # of plans of care reviewed that have supporting diagnosis # of reduction strategies implemented monthly	All residents who are currently prescribed antipsychotics will have a medication review completed by July 2024	

## Change Idea #2 Provide educational material to families and/or residents on antipsychotic use

Methods	Process measures	Target for process measure	Comments
1) Provide families with best practice information on reducing antipsychotics such as – Family Fact sheet from Canadian Geriatric Society, Pharmacy etc. 2) Add information on reducing antipsychotics to tour and admission packages	# of families provided with best practice information on reducing antipsychotics monthly # of tour and admission packages provided with antipsychotic reduction information included monthly	Educational material will be provided to families and/or residents on antipsychotics and important of minimizing use by Sept 2024	

**Measure - Dimension: Safe**

Indicator #9	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
% of LTC residents with restraints.	C	% / LTC home residents	POC/PCC Audits / Ontario-December 2023 PCC data	0.00	0.00	Corporate target 2.5% but working to continually improve and sustain results.	Achieva

**Change Ideas**

Change Idea #1 Review and assess PASD use for each resident in the home currently utilizing PASD's based on their individual needs

Methods	Process measures	Target for process measure	Comments
1. complete Quarterly assessments to determine that PASDs are appropriate. 2.Meet with families/residents to discuss alternatives that could be trialed and determine action plan in collaboration with family/resident.	# of quarterly assessments completed # of meetings held with families/residents to discuss alternatives	PASD use will be reviewed and assessed by Sept 2024 for each resident who currently uses PASD'.	

Change Idea #2 Re-educate staff on restraint policy and use of alternatives to restraints to increase awareness of requirements.

Methods	Process measures	Target for process measure	Comments
Organize education sessions with all staff on restraint policy and alternatives to restraints to increase awareness of policy and requirements on each shift.	# of staff education sessions held on restraint policy and alternatives to restraints # of staff who attended education sessions on policy	100% of staff will be re-educated on restraint policy and alternatives to restraints by Sept. 2024	

**Measure - Dimension: Safe**

Indicator #10	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	POC/PCC Audits / October-December 2023 PCC data	1.90	1.50	Corporate target 2% but working to continually improve results.	3M , NSWOC , Prevail

**Change Ideas**

Change Idea #1 1. Review current bed systems/surfaces for each resident assessed with PURS score 3 or greater.

Methods	Process measures	Target for process measure	Comments
1.Develop list of residents with PURS score 3 or greater. 2. Skin/wound team to review residents list to determine if surface meets their needs. 3. Replace mattress/surface if required	# of residents with PURS score 3 or greater # of reviews completed of bed surfaces/mattresses monthly # of bed surfaces /mattresses replaced monthly	A review of the current bed systems/surfaces for residents assessed with PURS score 3 or greater will be completed by August 2024	

Change Idea #2 Improve Registered staff knowledge on each shift for the identification and staging of pressure injuries

Methods	Process measures	Target for process measure	Comments
Provide education for Registered staff on the correct staging of pressure injuries on each shift.	# of education sessions held on correct staging of pressure injuries # of Registered staff who completed education	100% of registered staff will have received education on identification and staging of pressure injuries by Sept 2024	