

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents responding positively to: "What number would you use to rate how well the staff listen to you?"	O	% / LTC home residents	In house data, NHCAHPS survey / Most recent consecutive 12-month period	CB	CB		

Change Ideas

Change Idea #1

Methods	Process measures	Target for process measure	Comments
			We are prioritizing other areas of focus

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 the statement: "I can express my opinion without fear of consequences".	O	% / LTC home residents	In house data, interRAI survey / Most recent consecutive 12-month period	CB	CB		

Change Ideas

Change Idea #1

Methods	Process measures	Target for process measure	Comments
			We are prioritizing other areas of focus

Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident Satisfaction - Would Recommend	C	% / LTC home residents	In-house survey / 2023	73.50	75.00	Corporate target	

Change Ideas

Change Idea #1 Communication from home leadership is clear and timely. I am updated regularly about any changes in my home.

Methods	Process measures	Target for process measure	Comments
<p>1. Resident quarterly newsletter: The recreation department will create a resident specific newsletter to be made available to residents with updates on the home. This letter will start by being available quarterly and may become more frequent based on resident response to this communication method. 2. Lunch huddle – staff distribute information : When there is a time sensitive matter that needs to be communicated with the residents, the management team will go to the floors at lunch time to do a “lunch time huddle” with staff and residents. 3. Information board between the elevator on each floor : We will install “information” boards between the 2 elevators. On this board we will post the management changes, business hour changes or any other pertinent information for residents</p>	<p>1. We will evaluate how popular this method of communication by seeing how many newsletters are being taken. We will also ask residents in 1:1 conversation. We will also evaluate the outcome at the next survey and see if this indicator has increased. 2. We will evaluate outcome at the next survey and see if this indicator has increase 3. We will ask residents in 1:1 conversation. We will evaluate the outcome at the next survey and see if this indicator has increased.</p>	<p>Would recommend at 75%</p>	

Change Idea #2 I am satisfied with the food and beverages served to me

Methods	Process measures	Target for process measure	Comments
<p>1. Separated food committee meeting : The food committee will no longer be held at the same time as resident council to make the meetings less long and to have residents come that are only interested in food. Do waste audits and bring results to food committee 2. Seasoning tray : As we are in a health care setting, food cannot be too seasoned, therefore we will provide a seasoning tray with spices (ie. No salt) and sauces (ie. Ketchup, soy, etc.) for residents to add as they wish 3. New Menu May 2024</p>	<p>1. Attendance 2. General usage of the seasoning and how often they get emptied 3. Next resident satisfaction survey and waste audits</p>	Would recommend at 75%	

Measure - Dimension: Patient-centred

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Family Satisfaction - Would Recommend	C	% / Family	In-house survey / 2023	62.20	85.00	Corporate target	

Change Ideas

Change Idea #1 The resident has input into the recreation programs available.

Methods	Process measures	Target for process measure	Comments
1. Family forum in March about recreation services : In March, the recreation manager will present to the families how the recreation programs work within the home. She will also explain what the recreation team expectations are within the home. We hope that more awareness will help us to better understand. 2. Activity pro gold : This year we will launch Activity pro gold features, including sharing the calendar with families through the family portal.	Next year survey results	Would recommend at 85%	

Change Idea #2 I am satisfied with the timing and schedule of spiritual care services I am satisfied with the variety of spiritual care services

Methods	Process measures	Target for process measure	Comments
1. Volunteers programs : We are hoping to review our volunteer program and recruit more volunteers in different field, such as spiritual care. 2. Activity gold to have the schedule : This year we will launch Activity pro gold features, including sharing the calendar with families through the family portal.	Next year's survey results	Would recommend at 85%	

Change Idea #3 I have an opportunity to provide input on food and beverage options.

Methods	Process measures	Target for process measure	Comments
1. Activity gold menu sharing : This year we will launch Activity pro gold features, including sharing the menu with families through the family portal. 2. Participate in family news letter about seasonal menu or special menu : We will include food service in the family new letter (monthly) so they can share food committee outcomes and upcoming special menus	Next year's survey results	Would recommend at 85%	

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	15.70	15.00	Corporate Target	

Change Ideas

Change Idea #1 1. Implement specific activity program at afternoon change of high for resident 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 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 #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	15.83	17.00	Corporate Target	

Change Ideas

Change Idea #1 Medication reviews completed for all residents currently prescribed antipsychotics

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 currently prescribed antipsychotics will have a medication review completed by July 2024	

Change Idea #2 Provide educational material to families and/or residents on antipsychotics and the importance of minimizing 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 #7	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
% of LTC residents with restraints	C	% / LTC home residents	POC/PCC Audits / October to December 2023	2.20	2.50	Corporate Target	

Change Ideas**Change Idea #1** Review current restraints and determine plan for trialing alternatives to restraints

Methods	Process measures	Target for process measure	Comments
Review all residents currently utilizing restraints Meet with families/residents to discuss alternatives that could be trialed and determine action plan in collaboration with family/resident	# residents reviewed monthly # of meetings held with families/residents to discuss alternatives monthly # of action plans in place for reduction of restraints in collaboration with family/resident monthly	100% of restraints will be reviewed and plans implemented for trialing alternatives by Sept 2024	

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

Methods	Process measures	Target for process measure	Comments
Organize education sessions with all staff on restraint policy and alternatives to restraints	# of education sessions held monthly	100% of staff will be re-educated on restraint policy and alternatives to restraints by Sept 2024	

Measure - Dimension: Safe

Indicator #8	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 to December 2023	2.80	2.00	Corporate Target	

Change Ideas

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

Methods	Process measures	Target for process measure	Comments
Develop list of residents with PURS score 3 or greater Skin/wound team to review residents list to determine if surface meets their needs 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 with PURS score 3 or greater will be completed by August 2024	

Change Idea #2 Improve Registered staff knowledge on identification and staging of pressure injuries

Methods	Process measures	Target for process measure	Comments
Provide education for Registered staff on correct staging of pressure injuries	# of education sessions provided monthly for Registered staff on correct staging of pressure injuries	100% of registered staff will have received education on identification and staging of pressure injuries by Sept 2024	