

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident Satisfaction - Would Recommend	C	% / LTC home residents	In-house survey / 2023	70.00	75.00	Corporate target	

Change Ideas

Change Idea #1 Engage in regular discussions with residents related to their satisfaction

Methods	Process measures	Target for process measure	Comments
Encouraging feedback related to all areas. All staff auditing are to ask residents during meal service and record residents response on dining audits. Communication boards, newsletters and suggestion box implemented; all results continued to be shared with all	Improve survey results in 2024	Increase 2024 results by 5% from 70% to 75%	

Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Family Satisfaction - Would Recommend	C	% / LTC home residents	In-house survey / 2023	60.30	85.00	Corporate Target	

Change Ideas

Change Idea #1 During family council, explain how valued their feedback is related to all departments of their loved ones care

Methods	Process measures	Target for process measure	Comments
Ask the member during the meetings for their input related to food/beverage options, will introduce their choice quarterly. A suggestion box will also be created for those members not on the family council	A family newsletter will be distributed with updates from all departments monthly	The goal is to increase the survey result by 5% during the 2024 survey.	

Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
The resident has input into the recreational programs available	C	% / Family	In-house survey / January to December	32.50	37.50	team set goal	

Change Ideas

Change Idea #1 All families will be called by the recreation department with a script developed for those that have access to the family portal and for those that do not have access to the portal to encourage feedback related to their input into recreations programs available.

Methods	Process measures	Target for process measure	Comments
The "calling families script" will be used as well as the newsletter requesting feedback	Increase percentages on the annual survey	Increase the 2024 survey score by 5% to 37.5% through continued , ongoing feedback	

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 / January to December	39.90	44.60	team set goal	

Change Ideas

Change Idea #1 Communicate with families during family council and through the newsletter about implementing a suggestion box and encouraging them to use it

Methods	Process measures	Target for process measure	Comments
A suggestion box will be created for food and beverages idea input	Increase percentages for the 2024 survey	Through ongoing feedback, increase the 2024 score by 5% to 44.6%	

Measure - Dimension: Patient-centred

Indicator #5	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I am updated regularly about changes in my home 59.1%	C	% / Residents	In-house survey / January to December	59.10	64.10	team set goal	

Change Ideas

Change Idea #1 Communicate changes with staff during daily huddles, PCC dashboard, email all staff to enable staff to relay changes to residents when an inquiry is made.

Methods	Process measures	Target for process measure	Comments
A whole home change board will be implemented in a central location for all staff, residents and families to have the opportunity to be updated with all changes as they are happening	increase scores for 2024 surey	Increase score 5% in 2024 from 59.1% to 64.1%	

Measure - Dimension: Patient-centred

Indicator #6	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I am satisfied with the food and beverages served to me	C	% / Residents	In-house survey / January to December	60.40	65.40	team set goal	

Change Ideas

Change Idea #1 Engage in conversations with residents and collaborate with residents during resident council and the resident food council meetings

Methods	Process measures	Target for process measure	Comments
Allow the residents to choose a residents choice meal monthly and encourage feedback during meal service	Improve survey results in 2024	Increase survey result 5% in 2024 from 60.4 % to 65.4 %	

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	11.59	7.00	corporate target	

Change Ideas

Change Idea #1 Ongoing interdisciplinary team huddle for falls to determine the root cause of the fall.

Methods	Process measures	Target for process measure	Comments
Charting buddies in place to increase the residents more direct supervision. To determine the root cause of the fall, all items reviewed, scheduled toileting, environmental scans, appropriate alarms in place and mobility devices.	Improve QI % in 2024, remain under corporate target	Reduce falls by 2%	

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	9.07	8.00	corporate target	

Change Ideas

Change Idea #1 Collaborate with pharmacy and physicians regularly to safely reduce the use of antipsychotics.

Methods	Process measures	Target for process measure	Comments
BSO team will work closely with the care team during the reduction of antipsychotics and then implement nonpharmacological interventions as needed.	Residents that trigger the QI monthly will be reviewed with the team		Continue to monitor progress of the change idea

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	Other / 2023	1.90	2.50	Corporate target	

Change Ideas

Change Idea #1 Ensure alternatives trialed prior to restraint use

Methods	Process measures	Target for process measure	Comments
All restraints must be evaluated for effectiveness and reviewed at least quarterly by the multidisciplinary team to determine continued use	Reduce restraint use in 2024	Continue with restraint reduction strategies and reduce usage by 1% in 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	Other / 2023	1.90	2.00	Corporate target	

Change Ideas

Change Idea #1 Work in partnership with our vendors to enhance our assessment process and ensure correct product selection to promote healing

Methods	Process measures	Target for process measure	Comments
Education, repositioning implementation, care team meetings, huddles	improve % in 2024	Improve by 1% in 2024	