

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	95.10	75.00	Organizational corporate target	

Change Ideas

Change Idea #1 Promote a positive resident experience by offering programs that meet resident needs

Methods	Process measures	Target for process measure	Comments
Survey residents quarterly on planned recreation programs improvements.	# of the residents completed next year survey		By next survey, there will be a 5% increase in resident survey result recommending Main Street Terrace

Change Idea #2 Survey residents on the spiritual program's choices.

Methods	Process measures	Target for process measure	Comments
Based on survey results, various spiritual programs for residents are offered.	# of the residents attended spiritual programs of their choice		Resident satisfaction for 2024 has increase by 5%

Change Idea #3 Offer in services to residents on continence care program.

Methods	Process measures	Target for process measure	Comments
Enhance the overall satisfaction with continence care products by ensuring consistent quality, addressing any concerns, and possibly expanding the range of products offered to meet diverse needs.	# of the residents satisfied with their continent products	Resident satisfaction for 2024 has increased by 5%	

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 survey / 2023	43.20	75.00	Corporate Target	

Change Ideas

Change Idea #1 Increase resident input to recreation programs 10% in the following quarter.

Methods	Process measures	Target for process measure	Comments
Identify gaps and areas for improvement in existing programs based on resident input by scheduling program meetings with residents in the first week of the month.	# of the program suggestions implemented in the monthly calendar	Increase participation rates in recreation programs by 10% within the first three months through improved promotion and program offerings.	

Change Idea #2 Promote residents' contribution to recreation programs

Methods	Process measures	Target for process measure	Comments
Implement special events that will recognize and celebrate resident participation and contributions to recreation programs. Highlight resident-led initiatives, showcase artwork or performances, and acknowledge individual accomplishments to foster a sense of pride, belonging, and community spirit.	# of the events held in 2024	Increase resident satisfaction by 15% by August 2024	

Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I am satisfied with the relevance of recreation programs.	C	% / LTC home residents	In-house survey / 2023	55.30	75.00	Corporate Target	

Change Ideas**Change Idea #1** Increase satisfaction with resident programs by 10% in the next quarter

Methods	Process measures	Target for process measure	Comments
Survey residents quarterly during resident council meetings to obtain input on resident home area suggestions.	# of the residents participating in recreation programs to assess the impact of changes on resident engagement.	Provide training and support to staff and volunteers, resulting in a 10% improvement in participant satisfaction with program execution and delivery within three months.	

Change Idea #2 Monthly Program Planning Meetings on Each home area

Methods	Process measures	Target for process measure	Comments
Recreation Aids will hold a program planning meeting on each home area to gather suggestions for the programs that residents would like to have in the following month.	# of the programs implemented	Increase participation rates in recreation programs by 10% within the first three months through improved promotion and program offerings.	

Measure - Dimension: Patient-centred

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I am satisfied with the variety of spiritual care services.	C	% / LTC home residents	In-house survey / 2023	60.00	75.00	Corporate Target	

Change Ideas

Change Idea #1 Resident will provide the input on variety of spiritual programs they would like to participate in

Methods	Process measures	Target for process measure	Comments
Conduct a survey among the residents to obtain input about their spiritual needs inquire about the specific ways we can cater to their needs effectively.	# of the residents attending spiritual care events and activities	Maintain consistent communication with residents about spiritual care services, achieving a minimum of 65% awareness among the residents by July 2024	

Change Idea #2 Increase satisfaction with the variety of spiritual care services from 60.0% to 65% within the next six months.

Methods	Process measures	Target for process measure	Comments
Explore spiritual care programs such as yoga, meditation, journalling, poetry, spa relaxation that brings meaningful relaxation and wellness and offer to residents according to their interest.	# of spiritual programs offered quarterly	Increase attendance rates at spiritual care services by 5% by July 2024	

Measure - Dimension: Patient-centred

Indicator #5	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Family Satisfaction- Would Recommend	C	% / Family	In-house survey / 2023	85.70	85.00	Corporate Target	

Change Ideas

Change Idea #1 Provide Education to the families on Continence care Program.

Methods	Process measures	Target for process measure	Comments
The Continence Care program lead to provide in-services for the Family Council.	% of the survey outcome	Increase in Satisfaction by August 2024	

Change Idea #2 Improve family satisfaction on Spiritual programs offered at home.

Methods	Process measures	Target for process measure	Comments
The recreation Manager will survey the families on spiritual care program suggestions and provide opportunities for participation.	# of the surveys completed	10% increase in Family Satisfaction survey on resident spiritual programming	

Change Idea #3 Medical Directors to attend annual care conferences

Methods	Process measures	Target for process measure	Comments
Provide monthly schedule of annual care conferences to MD's	# of the care conferences attended	Increase in % of Family and resident satisfaction by August 2024	

Change Idea #4 Increase satisfaction with food and beverage choices from 66.7% to 75% within six months.

Methods	Process measures	Target for process measure	Comments
Nutrition Manager will provide Family Council with menu choices quarterly.	# of the received feedbacks	Increase in % annual satisfaction survey by 10%	

Measure - Dimension: Patient-centred

Indicator #6	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I am satisfied with variety, time and a schedule of Spiritual Care Services	C	% / Family	In-house survey / 2023	40.00	85.00	Corporate Target	

Change Ideas

Change Idea #1 Improve family satisfaction with Spiritual Programs by 5% quarterly

Methods	Process measures	Target for process measure	Comments
Residents' suggestions will be incorporated into the Recreation Calendar, which will be mailed out to families monthly for awareness	The recreation manager will survey families by August 2024 to determine the effectiveness of the changes incorporated.	Increase in the % of satisfaction with spiritual programming.	

Change Idea #2 Spiritual programs offered on the weekends and evening

Methods	Process measures	Target for process measure	Comments
Recreation Aids to schedule Spiritual care programming on the evenings and weekends , that will give mor opportunities for families to participate	# of the families that joined spiritual programs	Increase family satisfaction with Spiritual care Services by August 2024	

Measure - Dimension: Patient-centred

Indicator #7	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Involvement from doctors	C	% / Family	In-house survey / 2023	60.00	85.00	Corporate Target	

Change Ideas

Change Idea #1 Increase involvement from doctors in care conferences from the current rate of 60% to the target rate of 70% in next quarter.

Methods	Process measures	Target for process measure	Comments
Create a schedule and email calendar inviting MDs to attend	# of the CC MD's attended	Achieve a monthly increase in doctor attendance at care conferences by 5% until reaching the target of 75% by August 2024	

Change Idea #2 Improve the communication between home and MD's

Methods	Process measures	Target for process measure	Comments
Set up Quarterly meetings with MD, ED and DOC to review concerns.	# of the meetings held	100% participation by doctors in the meetings scheduled	

Measure - Dimension: Patient-centred

Indicator #8	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I am satisfied by food and beverage choices.	C	% / Family	In-house survey / 2023	66.70	85.00	Corporate target	

Change Ideas

Change Idea #1 Provide the opportunity for Family Council to review and give input on resident's food menu Quarterly.

Methods	Process measures	Target for process measure	Comments
Share with Family Council that the menu has been reviewed and endorsed by the resident council, ensuring everything listed has been approved by the residents. If there are any specific items outside of the approved menu that they wish their resident to have, they are encouraged to communicate with the Food Service Manager	# of families that provided the feedback	Achieve an increase in satisfaction levels to 75% by August 2024	

Change Idea #2 The Dietary Department will have resident choice dinner once a month.

Methods	Process measures	Target for process measure	Comments
Survey residents during resident Food Council Meetings on what would be their dinner of choice the following month.	# Number of resident suggestions	Implementation of this initiative by May 2024	

Safety

Measure - Dimension: Safe

Indicator #9	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	7.53	15.00	Corporate Target	

Change Ideas

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

Methods	Process measures	Target for process measure	Comments
Review current high-risk residents for falls to identify their needs/preferences for activities	# 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 tripping hazards.

Methods	Process measures	Target for process measure	Comments
Staff to do environmental assessments for all residents at high risk for falls at minimum monthly.	# of environmental assessments completed monthly		Environmental risk assessments of resident spaces to identify fall risk will be completed by June 2024

Measure - Dimension: Safe

Indicator #10	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	7.37	17.30	Corporate Target	

Change Ideas

Change Idea #1 Continue with participating in antipsychotic reduction program and decision support tool pilot.

Methods	Process measures	Target for process measure	Comments
Interdisciplinary team to attend bi-monthly meetings to review the current list of the residents participating in this program. Keep the Antipsychotics decision support tool current.	# of the residents without psychosis who were given antipsychotic medication	Successfully completing the pilot program	

Change Idea #2 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	

Measure - Dimension: Safe

Indicator #11	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
% of LTC residents with restraints	C	% / LTC home residents	Other / 2023	0.00	2.50	Corporate target	

Change Ideas

Change Idea #1 Continue with zero restraints approach at the home.

Methods	Process measures	Target for process measure	Comments
Re-educate staff on restraint policy and use of alternatives to restraints.	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

Change Idea #2 Assess the current use of restraints and develop a plan to test alternative approaches.

Methods	Process measures	Target for process measure	Comments
Continue with an interdisciplinary approach to have zero restraint at the home	# of the staff attending interdisciplinary meetings	100% of staff will be re-educated on restraint policy and alternatives to restraints by Sept 2024	

Measure - Dimension: Safe

Indicator #12	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	2.93	2.00	Corporate Target	

Change Ideas

Change Idea #1 Re-educate frontline staff regarding prevention of skin break down.

Methods	Process measures	Target for process measure	Comments
Each unit utilizes a risk management board to communicate information about high-risk residents susceptible to pressure injuries. Staff members carefully examine each resident's care plan to ensure that appropriate interventions are in place for their individual well-being. Any indications of deterioration are promptly reported, and referrals to physical therapy and dietitian services are initiated as necessary. Multiple wound audits are conducted to maintain consistency and accuracy, minimizing the possibility of discrepancies.	#of education, sessions provided monthly for front-line staff on prevention of skin break downs	100% of registered staff will have received education on identification and staging of pressure injuries by Sept 2024	

Change Idea #2 Review current bed systems/surfaces for residents with PURS score 3 or greater.

Methods	Process measures	Target for process measure	Comments
Skin/wound team to review residents list to determine if surface meets their needs	# 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	