

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents who would positively respond to the statement "I would recommend this home" on the Annual Resident Satisfaction Survey.	C	% / LTC home residents	In-house survey / 2023-2024	57.10	75.00	Corporate Target	

Change Ideas

Change Idea #1 Ensure that residents are given the opportunity to become involved in the running of Reachview Village through participation in Resident Council

Methods	Process measures	Target for process measure	Comments
Every Resident is invited monthly to our Residents' Council meeting	1.Ensure all residents receive a calendar supplied to them monthly. 2.Reminder will be announced day of Resident's council meeting	Increase positive response by 25% on 2024 Satisfaction Survey to the statement "I would recommend this home"	

Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of families who would positively respond to the statement "I would recommend this home" on the Annual Family Satisfaction Survey.	C	% / Family	In-house survey / 2023-2024	88.50	85.00	Corporate Target	

Change Ideas

Change Idea #1 Ensure all families receive invitations to attend monthly Family Council meetings

Methods	Process measures	Target for process measure	Comments
All families are invited monthly to attend Family Council and they receive a copy of the Resident's Program Calendar	Complete tracking to ensure all families receive invitations to Family Council	100% of our families will receive notification or an invitation to monthly Family Council meetings	

Change Idea #2 Ensure that families are given the opportunity to become involved in the running of Reachview Village through participation in Quality Council

Methods	Process measures	Target for process measure	Comments
Family members will be invited to attend in person or virtually, quarterly Quality Council meetings	Family members will be called to determine if they would be interested and available to attend a Quality Council meeting. If response is positive, an invite will be sent by email.	Remain above 85% Satisfaction on 2024 Survey to the statement "I would recommend this home"	

Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents who would positively respond to the statement "I am satisfied with the quality of spiritual care"	C	% / LTC home residents	In-house survey / 2023-2024	26.30	73.70	Corporate target	

Change Ideas

Change Idea #1 Provide Residents education of "What is spirituality?"

Methods	Process measures	Target for process measure	Comments
Provide information "What is spirituality" meaning- What's the difference between religion and spirituality?	Complete tracking tool to ensure all residents receive spirituality education	Increase positive response to 75% Satisfaction on 2024 Survey to the statement "I am satisfied with the variety of Spiritual care services"	

Change Idea #2 Recreation Manger to educate residents on Spiritual Services available

Methods	Process measures	Target for process measure	Comments
1. Rec manager to be included in the attendance for care conferences, to increase opportunity for residents and family members to share and inquire about recreation/spiritual programming by March 25, 2024.	1. Rec manger will create a ballot to have by the suggestion box that is about recreation and spiritual programming specifically for residents to provide input by March 25, 2024.	Increase positive response by 10% on 2024 Satisfaction Survey to the statement "I am satisfied with the variety of Spiritual care services"	

Measure - Dimension: Patient-centred

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents who would positively respond to the statement "Dietician-I am satisfied with the quality"	C	% / LTC home residents	In-house survey / 2023 -2024	33.30	69.20	Corporate Target	

Change Ideas

Change Idea #1 Ensure residents are educated regarding the role of Dietician

Methods	Process measures	Target for process measure	Comments
1.Dietician to attend Family & Resident council as a guest speaker by April 25, 2024 2.Note at Resident council and in monthly newsletters that any resident wishing to speak with the Dietician can book a meeting through the nursing department. (Create dietitian communication binder to be kept on Cedar) by April 25, 2024.	-Dietary manager to utilize suggestion box for feedback -Dietary manager to speak with residents regarding Dietician concerns at Food Committee meeting.	Increase positive by 15% on 2024 Satisfaction Survey to the statement "Dietician-I am satisfied with the quality"	

Measure - Dimension: Patient-centred

Indicator #5	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of family members who would positively respond to the statement "I am satisfied with the variety of Spiritual care services"	C	% / Family	In-house survey / 2023-2024	55.60	59.40	Corporate Target	

Change Ideas

Change Idea #1 Provide family Education of "What is spirituality?"

Methods	Process measures	Target for process measure	Comments
Provide information "What is spirituality" meaning- What's the difference between religion and spirituality?	Complete tracking tool to ensure all families receive spirituality education and the online survey.	Increase positive response to 75% Satisfaction on 2024 Survey to the statement "I am satisfied with the variety of Spiritual care services"	

Change Idea #2 Recreation Manger to educate families and residents on Spiritual Services available

Methods	Process measures	Target for process measure	Comments
1. Rec manager to be included in the attendance for care conferences, to increase opportunity for residents and family members to share and inquire about recreation/spiritual programming by March 25, 2024. 2.	1. Rec manger will create a ballot to have by the suggestion box that is about recreation and spiritual programming specifically for families to provide input by March 25, 2024. 2.- Rec manager to attend family council to discuss input on recreation programs available as well as the variety of spiritual programming available once invited (will aim to attend next family council meeting before end of March 2024)	Increase positive response by 10% on Satisfaction 2024 Survey to the statement "I am satisfied with the variety of Spiritual care services"	

Measure - Dimension: Patient-centred

Indicator #6	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of family members who would positively respond to the statement "I am satisfied with the quality of maintenance of the physical building and outdoor spaces"	C	% / Family	In-house survey / 2023-2024	57.70	71.20	Corporate Target	

Change Ideas

Change Idea #1 Improve landscaping around facility

Methods	Process measures	Target for process measure	Comments
1. New landscaping company obtained for the 2023-2024 season. 2. Centre Garden to be fixed in the spring. 3. Parking lot to be paved and new lines painted as per capital asks	1. Reach out to families at Family Council for feedback on changes made. 2. Created a suggestion box for families to anonymously provide feedback.	Remain above 71.2% Satisfaction on 2024 Survey to the statement "I am satisfied with the quality of maintenance of the physical building and outdoor spaces"	

Change Idea #2 Improve quality of maintenance and physical building

Methods	Process measures	Target for process measure	Comments
1. All lighting in the building will be reviewed with opportunities for changing 2. Replacing Spa room floors 3. ESM to be invited to family council to discuss specific concerns by April 2024. ESM will round the home immediately and on-going and speak with the families to gather insight and input into any areas of concern	1. Reach out to families at Family Council for feedback on changes made. 2. Created a suggestion box for families to anonymously provide feedback.	Remain above 71.2% Satisfaction on 2024 Survey to the statement "I am satisfied with the quality of maintenance of the physical building and outdoor spaces"	

Safety

Measure - Dimension: Safe

Indicator #7	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of long-term care home residents in daily physical restraints over the last 7 days	C	% / Residents	CIHI CCRS / July 2023–September 2023 (Q2 2023/24), with rolling 4-quarter average	0.00	4.00	Corporate Target	

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

Methods	Process measures	Target for process measure	Comments
1)Review all residents currently utilizing restraints 2)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	

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	

Measure - Dimension: Safe

Indicator #8	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of LTC residents with worsened ulcers stages 2-4	C	% / Residents	CIHI CCRS / July 2023–September 2023 (Q2 2023/24), with rolling 4-quarter average	1.60	2.00	Corporate Target	

Change Ideas

Change Idea #1 1) Increase care staff knowledge as it relates to preventative and management of skin integrity.

Methods	Process measures	Target for process measure	Comments
Education to be provided in variety of ways to increase both PSW and Registered Staff knowledge. Staff Educator/Wound care champion will complete wound rounds and provide one-to-one education on wound care; Staff educator/Wound Care Champion will provide hands on instruction on skin care, wound care and transfer techniques to avoid injury.	# of newly acquired pressure injuries will be monitored monthly. % of residents with worsening pressure injuries will be monitored monthly.	% of worsened pressure injuries will meet corporate target.	

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	C	% / Residents	CIHI CCRS / July 2023–September 2023 (Q2 2023/24), with rolling 4-quarter average	13.80	13.00	Corporate Target	

Change Ideas

Change Idea #1 1)Implement specific locations in the home for staff to chart/monitor 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 2.Discuss high risk residents during rounds	Those residents identified as high risk falls have decreased in severity and number of falls	Decrease in #falls	

Change Idea #2 Increase attention to front line staff regarding increased falls rate

Methods	Process measures	Target for process measure	Comments
Campaign to bring attention to front line staff about falls rate and QIP to meet corporate target. Will use posted falls rate for all units comparing falls rate over time (quarter by quarter) with posters on staff boards. 2. Report on falls rate at monthly staff meetings	Staff meeting minutes and updated posters/campaign will be evidence of methods in place	To meet corporate target	

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	C	% / Residents	CIHI CCRS / July 2023–September 2023 (Q2 2023/24), with rolling 4-quarter average	7.70	18.00	Corporate Target	

Change Ideas

Change Idea #1 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 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	Educational material will be provided to families and/or residents on antipsychotics and important of minimizing use by Sept 2024	