

## Experience

### Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident satisfaction-Would recommend the home.	C	% / LTC home residents	Other / Oct-Dec	100.00	75.00	Home based target.	

### Change Ideas

Change Idea #1 Maintain our high level of resident satisfaction.

Methods	Process measures	Target for process measure	Comments
Continue to provide a high standard of care to our residents, as per the Ministry guidelines.	Minimal concerns identified by residents.	Will be implemented by March 2024	

Change Idea #2 Continue to maintain open communication with our residents

Methods	Process measures	Target for process measure	Comments
Foster a culture of open communication within the home.	Satisfaction indicated on CSR forms from residents.	Will be implemented by March 2024	

Change Idea #3 Continue resident council meetings as planned.

Methods	Process measures	Target for process measure	Comments
Hold regularly scheduled resident council meetings.	Resident counsel working cohesively with the home.	Will be implemented by April. 2024.	

**Measure - Dimension: Patient-centred**

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident-Satisfied with the quality of care provided by social work	C	% / LTC home residents	Other / Oct-Dec	100.00	70.00	Home based target.	

**Change Ideas**

Change Idea #1 Provide the opportunity for social work assistance to be available for the residents in the home.

Methods	Process measures	Target for process measure	Comments
Research social work services available for the home.	Social work services are available to the residents and families of our home.	Will be implemented by April. 2024	

Change Idea #2 Educate the residents, staff and families of the process to activate social work assistance.

Methods	Process measures	Target for process measure	Comments
Provide education sessions to the staff residents and families regarding the social work services available in the home.	Residents, families and staff will utilize the social work referral services.	Will be implemented by June. 2024.	

Change Idea #3 Seek feedback from the residents and families to ensure social work needs are met.

Methods	Process measures	Target for process measure	Comments
Complete annual resident survey.	Improved resident outcomes related to social work issues.	Will be implemented by September. 2024	

**Measure - Dimension: Patient-centred**

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident-Satisfied with quality of care from Physiotherapist/Occupational Therapist	C	% / LTC home residents	Other / Oct-Dec	91.70	95.00	Home based target.	

**Change Ideas**

Change Idea #1 Review the contract of with Physiotherapist/Occupational Therapist to assess for areas of potential improvement.

Methods	Process measures	Target for process measure	Comments
Review the contract with the nursing team.	All areas will be addressed.	Will be implemented by June, 2024.	

Change Idea #2 Maintain open communication with Physiotherapist/Occupational Therapist.

Methods	Process measures	Target for process measure	Comments
Submit referrals in a timely manner.	Follow up to ensure referrals are completed in a timely manner.	Will be implemented by June 2024.	

Change Idea #3 Seek feedback from residents and families to ensure Physiotherapy/Occupational therapy needs are met.

Methods	Process measures	Target for process measure	Comments
Complete annual resident survey.	Residents, families and staff will utilize the Physiotherapy/Occupational Therapy services, as appropriate.	Will be implemented by June, 2024.	

## Measure - Dimension: Patient-centred

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident satisfied with the timing and schedule of spiritual care services.	C	% / LTC home residents	Other / Oct-Dec	91.70	95.00	Home based target.	

### Change Ideas

Change Idea #1 Provide an opportunity at residents' council meeting for resident input into the timing and schedule of spiritual care services.

Methods	Process measures	Target for process measure	Comments
Hold regular resident council meetings.	Residents will attend and actively participate in meetings.	Will be implemented by May, 2024	

Change Idea #2 Communicate spiritual program times and changes.

Methods	Process measures	Target for process measure	Comments
Upcoming events and changes will be shared in person or my memo to the residents and families to ensure they are aware of spiritual programs.	Residents will be aware of services and attend services of their choosing.	Will be implemented by May, 2024.	

Change Idea #3 Seek feedback from the residents and families to ensure their spiritual needs are being met.

Methods	Process measures	Target for process measure	Comments
Complete annual resident survey.	Residents, families and staff will utilize the spiritual services as they choose to attend.	Will be implemented by May, 2024.	

**Measure - Dimension: Patient-centred**

Indicator #5	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Family satisfaction: Would recommend the home?	C	% / LTC home residents	Other / Oct-Dec	100.00	85.00	Corporate Target.	

**Change Ideas**

Change Idea #1 Maintain our high level of family satisfaction.

Methods	Process measures	Target for process measure	Comments
Continue to provide a high standard of care to our residents, as per Ministry standards.	Minimal concerns identified by families and residents.	Will be implemented by March, 2024.	

Change Idea #2 Continue open communication with our families.

Methods	Process measures	Target for process measure	Comments
Foster a culture of open communication with families thru posting communications within the home, responding to messages in a timely manner.	Satisfaction indicated on CSR forms from residents and families.	Will be implemented by March, 2024.	

Change Idea #3 Continue family council meetings.

Methods	Process measures	Target for process measure	Comments
Hold family council meetings as scheduled.	Family participation in family council meetings.	Will be implemented by April, 2024.	

## Measure - Dimension: Patient-centred

Indicator #6	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Family-There is a good choice of continence care products.	C	% / LTC home residents	Other / Oct-Dec	51.70	70.00	Home based target.	

### Change Ideas

Change Idea #1 Review the types of continence products that are available thru our vendor.

Methods	Process measures	Target for process measure	Comments
Review the types of continence products that are currently being used in the home to ensure the residents needs are being met with our current products.	The home has available different types of incontinence products for resident specific needs.	Will be implemented April, 2024.	

Change Idea #2 Educate families and residents about the different types of continence products in our home.

Methods	Process measures	Target for process measure	Comments
Provide education to families and residents regarding the incontinence products available and their specific uses from our vendor.	Families and residents will have a solid understanding of our homes incontinence products.	Will be implemented by May, 2024.	

Change Idea #3 Seek Feedback from the families and residents to ensure their resident specific continence needs are being met.

Methods	Process measures	Target for process measure	Comments
Complete annual resident survey. Review continence care requirements at annual care conferences.	Families are educated on the products available and satisfied with the products available for their resident.	Will be implemented by September, 2024.	

## Measure - Dimension: Patient-centred

Indicator #7	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Family-Satisfied with the quality of care from social work.	C	% / LTC home residents	Other / Oct-Dec	66.70	75.00	Home based target.	

### Change Ideas

Change Idea #1 Provide the opportunity for social work assistance to be available to the residents in the home.

Methods	Process measures	Target for process measure	Comments
Research social work services available to the residents and families.	Social work services are available to the residents and families.	Will be implemented by April, 2024	

Change Idea #2 Educate the residents families and staff on the process to activate social work assistance.

Methods	Process measures	Target for process measure	Comments
Provide education sessions to staff residents and families regarding the social work services available in the home.	Residents, families and staff will utilize the social work referral services.	Will be implemented by June, 2024.	

Change Idea #3 Seek feedback from the residents and families to ensure social work needs are being met.

Methods	Process measures	Target for process measure	Comments
Complete annual resident survey.	Improved resident outcomes related to social work issues.	Will be implemented by September, 2024	

**Measure - Dimension: Patient-centred**

Indicator #8	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Family-Continence care products keep the resident dry.	C	% / LTC home residents	Other / Oct-Dec	66.70	80.00	Home based target.	

**Change Ideas**

Change Idea #1 Ensure a continence assessment is completed on all residents.

Methods	Process measures	Target for process measure	Comments
Complete incontinence assessment in PCC quarterly and with significant changes.	Incontinence assessment is accurate for all residents.	Will be completed by March, 2024.	

Change Idea #2 Review the type of continence products that residents are currently using.

Methods	Process measures	Target for process measure	Comments
Change type of incontinence products as appropriate/required.	Residents will be in the proper incontinence product to suit their specific needs.	Will be implemented by May, 2024.	

Change Idea #3 Seek feedback from the residents and families to ensure incontinence needs are being met.

Methods	Process measures	Target for process measure	Comments
Complete annual residents survey. Review incontinence requirements at annual care conferences.	Residents skin is healthy and there are minimal issues related to leaking products.	Will be implemented by September, 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	25.34	15.00	Corporate Target	

**Change Ideas**

Change Idea #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 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 #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	26.47	17.30	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 #11	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
% of LTC residents with restraints	C	% / LTC home residents	Other / Oct-Dec	0.00	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
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 Sept 2024.	

Change Idea #2 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 #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 / Oct-Dec	11.10	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
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 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
1) 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.	