

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident Satisfaction - Would recommend.	C	% / Residents	In house data collection / Annual Satisfaction Survey Q3	92.30	75.00	Corporate target	

Change Ideas

Change Idea #1 Review the results from the 2023 resident experience survey and implement an action plan to address low scoring indicators. Improving these identified areas will have a direct positive effect on the overall % for resident would recommend this home.

Methods	Process measures	Target for process measure	Comments
Survey the residents of our Long-Term Care Home in the fall of 2024 and encourage participation of eligible participants while providing assistance as required by a designated person(s) that is not employed by the long-term care home. Implementation of the resident experience Survey within the timelines provided. Communicate and educate the importance of the survey and the benefits.	Results from the 2023 resident experience Survey will be compared to the results from the 2024 resident experience survey.	All current long term care home residents at the time of the survey that meet the eligibility criteria will have the opportunity to complete the survey. Results from the 2024 resident experience Survey. Achieve the target of 75% for resident would recommend this home to others.	

Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
family satisfaction - would recommend.	C	% / Family	In-house survey / Annual satisfaction survey Q3	70.00	85.00	Corporate target	

Change Ideas

Change Idea #1 Review the results from the 2023 family experience survey and implement an action plan to address low scoring indicators. Improving these identified areas will have a direct positive effect on the overall % for family would recommend this home.

Methods	Process measures	Target for process measure	Comments
Survey the families of our Long-Term Care Home in the fall of 2024 and encourage participation including assistance with technical or other barriers that may be a factor for some participants. Implementation of the family experience Survey within the timelines provided. Communicate and educate the importance of the survey and the benefits.	Results from the 2023 Family experience Survey will be compared to the results from the 2024 Family experience survey.	All members of current long term care home residents at the time of the survey will have the opportunity to complete the survey. Results from the 2024 Family experience Survey. Achieve the target of 85% for Family would recommend this home to others.	

Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Maintenance of the physical building and grounds is improving.	C	% / Residents	In-house survey / Annual satisfaction survey Q3	63.60	68.00	Corporate LTC Division overall 2023 %	

Change Ideas

Change Idea #1 Review maintenance grounds contract and ensure contract review and if applicable renewal is completed in a timely manner to avoid any disruptions (as experienced in spring of 2023). The current contract expires May 1, 2024.

Methods	Process measures	Target for process measure	Comments
ED and ESM to review the current contract and complete a contractor service audit.	overall score of the contracted service audit	All current long term care home residents at the time of the survey that meet the eligibility criteria will have the opportunity to complete the survey. Results from the 2024 resident experience Survey. Achieve the corporate LTC Division overall 2023 score of 68%.	

Change Idea #2 Review with Environmental team the job routines and cleaning schedules, the staffing plan, and audits used to rate the cleanliness and effectiveness of the services completed.

Methods	Process measures	Target for process measure	Comments
The ESM will re-implement regular departmental meetings with the housekeeping and laundry teams.	# of departmental meetings held during the year and # of audits completed as per the quality activity calendar & overall scores of the completed audits.	All current long term care home residents at the time of the survey that meet the eligibility criteria will have the opportunity to complete the survey. Results from the 2024 resident experience Survey. Achieve the corporate LTC Division overall 2023 score of 68%.	

Change Idea #3 Reach out to the local high school and university's horticultural programs for relationship building and opportunities for volunteer hours or programs to focus on exterior grounds of the building (with the focus on spring cleanup).

Methods	Process measures	Target for process measure	Comments
ED and PM will work together to build relationships in the community with the local schools.	# of new community relationships involved in the home	All current long term care home residents at the time of the survey that meet the eligibility criteria will have the opportunity to complete the survey. Results from the 2024 resident experience Survey. Achieve the corporate LTC Division overall 2023 score of 68%.	

Measure - Dimension: Patient-centred

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I am satisfied with the quality of care from doctors.	C	% / Residents	In-house survey / Annual satisfaction survey Q3	18.20	65.50	Corporate LTC Division overall 2023 %	

Change Ideas

Change Idea #1 Gather further information from residents on the expectations of the doctor and share with the medical director and the registered nursing team.

Methods	Process measures	Target for process measure	Comments
Team to discuss with residents individually as well as at resident council to gain insight into the expectations and gather feedback for improvement ideas.	% score for I am satisfied with the quality of care from doctors from the 2024 survey	All current long term care home residents at the time of the survey that meet the eligibility criteria will have the opportunity to complete the survey. Results from the 2024 resident experience Survey. Achieve the corporate LTC Division overall 2023 score of 65.5%.	

Change Idea #2 Provide education on what, how, when medical attention and physician visits can be obtained.

Methods	Process measures	Target for process measure	Comments
Create a general information page that will include this information and add to the admission package, resident council agenda, and review at admission and annual care conferences.	% score for I am satisfied with the quality of care from doctors from the 2024 survey	All current long term care home residents at the time of the survey that meet the eligibility criteria will have the opportunity to complete the survey. Results from the 2024 resident experience Survey. Achieve the corporate LTC Division overall 2023 score of 65.5%.	

Measure - Dimension: Patient-centred

Indicator #5	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I have input into the recreation programs available	C	% / Residents	In-house survey / Annual satisfaction survey Q3	53.80	63.90	Corporate LTC Division overall 2023 %	

Change Ideas

Change Idea #1 Gain further insight and understanding as to the various types of programs residents wish to participate in and the timing. Look for opportunities to have increased community engagement in programs that are offered.

Methods	Process measures	Target for process measure	Comments
<p>The home will survey residents related specifically to the types and timing of programs they would like to see offered in the home. The activity calendar will reflect programs that the residents would like based on this survey.</p> <p>Residents Council will discuss programs as a standing agenda item at each of their monthly meetings and will be asked for input into what types of programs they would like to see on the calendar for upcoming months.</p>	<p>% score of I have input into the recreation programs available from the 2024 survey # of residents attending each type of program # of community partner programs offered</p>	<p>All current long term care home residents at the time of the survey that meet the eligibility criteria will have the opportunity to complete the survey. Results from the 2024 resident experience Survey. Achieve the corporate LTC Division overall 2023 score of 63.9%.</p>	

Measure - Dimension: Patient-centred

Indicator #6	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
The residents care conference is a meaningful discussion that focuses on what's working well, what can be improved, and potential solutions.	C	% / Family	In-house survey / Annual satisfaction survey Q3	66.70	74.60	Corporate LTC Division overall 2023 %	

Change Ideas

Change Idea #1 Review and enhance the current process for admission and annual care conferences to have meaningful conversations, opportunities for input into the resident plan of care, and provide education as required.

Methods	Process measures	Target for process measure	Comments
1. Identify a lead for the care conference process 2. Create a process for scheduling, inviting, tracking the conferences and encourage family and resident attendance. 3. Create a standard process for the Reg. Staff to lead the conference. 4. Create a standard for all departments to follow the same flow of agenda items to review and educational items to include at all conferences (utilize other low scoring areas from survey to include in regular education at conferences i.e. dining, incontinence care products etc.) 5. Re-initiate the admission care conference process following the annual review process as developed above. 6. Educate the interdisciplinary team on the revised admission and annual care conference process.	% score of The residents care conference is a meaningful discussion that focuses on what's working well, what can be improved, and potential solutions from the 2024 survey # of admission care conferences # of annual care conferences # of families/POA/SDMs attending conferences	All members of current long term care home residents at the time of the survey will have the opportunity to complete the survey. Results from the 2024 Family experience Survey. Achieve the corporate LTC Division overall 2023 score of 74.6%.	

Measure - Dimension: Patient-centred

Indicator #7	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I have an opportunity to provide input on food and beverage options.	C	% / Family	In-house survey / Annual satisfaction survey Q3	44.40	51.00	Corporate LTC Division overall 2023 %	

Change Ideas

Change Idea #1 Improved communication with family members and increased attendance of family members at admission and annual care conferences.

Methods	Process measures	Target for process measure	Comments
implement change ideas for the care conference indicator which will have a direct impact on this indicator. Include information on how our menus are made and how they are reviewed with resident council for input in town hall family meetings and in at least one new quarterly newsletter.	% score from the I have an opportunity to provide input on food and beverage options from the 2024 survey	All members of current long term care home residents at the time of the survey will have the opportunity to complete the survey. Results from the 2024 Family experience Survey. Achieve the corporate LTC Division overall 2023 score of 51%.	

Measure - Dimension: Patient-centred

Indicator #8	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
There is a good choice of continence care products	C	% / Family	In-house survey / Annual satisfaction survey Q3	37.50	52.40	Corporate LTC Division overall 2023 %	

Change Ideas

Change Idea #1 Enhance family knowledge about the products, availability, assessments used to determine individual resident product selection, and continence program.

Methods	Process measures	Target for process measure	Comments
Create general information flyer to add to the admission package, review the information at the admission care conference and the annual care conference. Complete education at the family town hall meeting on the continence program. Add continence program and product information to one of the quarterly internal newsletters for families.	% score of There is a good choice of continence care products from the 2024 survey	All members of current long term care home residents at the time of the survey will have the opportunity to complete the survey. Results from the 2024 Family experience Survey. Achieve the corporate LTC Division overall 2023 score of 52.4%.	

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	9.09	9.00	Home Specific Target	

Change Ideas

Change Idea #1 Conduct environmental assessments of resident spaces to identify potential fall risk areas and address areas for improvement. Re-implement weekly falls meetings.

Methods	Process measures	Target for process measure	Comments
1. Staff to do environmental assessments for all residents on admission, re-admission, change in condition, change in roommate, and or change in furniture/belongings in resident room 2. Address any identified deficiencies from completed assessments.	# of environmental assessments completed # of identified deficiencies from assessments that were corrected	Environmental risk assessments of resident spaces to identify fall risk will be completed within 24hrs of a triggering event	

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	17.39	17.30	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	Participate in the AP Program with a target go live date in March 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	% / Residents	CIHI CCRS / Q3 Oct - Dec PCC data	0.00	2.50	Corporate Target	

Change Ideas

Change Idea #1 Begin the discussion of the least restraint policy and program prior to resident admission. Review all new admissions for use of restraints.

Methods	Process measures	Target for process measure	Comments
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 the 6 week admission care conference	

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	% / Residents	CIHI CCRS / Oct - Dec PCC data	0.00	2.00	corporate target	

Change Ideas

Change Idea #1 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	