2025/26 Quality Improvement Plan for Yee Hong CPS Improvement Targets and Initiatives

Measure C									Change				
Measure/Indicator	Туре	Unit / Population	n Source / Period	Organization Id	Current performance	Target	Target justification	External Collaborators	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Target for process measure	Comments
M = Mandatory (all cel Number of clients who had a recent fall while accessing CSS services/programs	IIs must be com	pleted) P = Priority # / CSS Client	(complete ONLY th PointClickCare/ Jan - Dec 2025 Internal incident tracking system data		8.00	g on this indicat	or) O= Optional (do			tom (add any other indicators you are working on) a. Assess the client's falls risk, identify the client's risk of falls using an adapted falls screening tool, and develop or adjust client's care plan as appropriate.	a. Percentage of clients assessment/re-assessed for falls risk using an adapted falls screening tool.	a. Achieve 100% of client's assessed/re-assessed for falls risk using an adapted falls screening tool by December 31, 2025.	
									2. Design and implement an exercise session to improve client's mobility.	a. Develop well-designed exercise and body movement sessions for ADP/CD clients to improve their body balance.	a. Number of regular fall-prevention exercise sessions scheduled in Adult Day Program (ADP) and Congregate Dinning (CD) program to improve body balance and movement.	 a. Conduct at least one (1) fall prevention exercise session at each of the four (4) ADP and two (2) CD programs by December 31, 2025. 	
									 Raise awareness of fall prevention among clients and caregivers by providing educational talks and distributing informative materials. 	 a. Design and create a visual informative poster that highlight key fall prevention strategies. Display the poster in prominent locations within the ADP/CD program area. b. Conduct information sessions for clients and caregivers to raise awareness about fall prevention. 	 a. Number of infographic poster on Fall Prevention created and displayed. b. Number of information sessions on fall prevention conducted for clients and caregivers. 	 a. Create one (1) infographic poster on Fall Prevention and display it in the program area by September 30, 2025. b. Conduct two (2) information sessions on Fall Prevention by December 31, 2025. 	
Number of medication reminder service adherence issues*	С	# / Clients in Home Support Services	PointClickCare/ Jan - Dec 2025 Internal incident tracking system data	HSS	19.00	18.00	To reduce harm and risk related to medication.	N/A	 Enhance the understanding and awareness of medication adherence among caregivers and clients. 	a. Create a leaflet on the importance of medication adherence, incorporating inputs from staff. The leaflet will be shared during the departmental team meeting and the final version will be ready for distribution.	a. Number of leaflet developed with staff feedback and distribute to clients and caregivers.	a. Finalize and distribute one (1) leaflet on the importance of medication adherence by October 30, 2025.	*A medication non-adherence incident is any preventable event leading to inappropriate medication use or harm while under the control of healthcare professionals or clients. It often results from failure to follow the 5R procedure – right client, right medication, right dose, right time and right route. Client-related factors, like refusal, mishandling (dropping or losing pills), or misunderstanding instructions, can also contribute. Whether due to professional errors or client actions, these incidents can impact safety and treatment effectiveness. References: 1. Sheila A. Sorrentino & Mary J. Wilk (2017). Mosby's Canadian Textbook for the Support Worker, 4th Edition 2. CPS-HSS-II-07 Incident Report & CPS-HSS-II-11 Medication Reminder
									 Conduct annual medication service demonstrations to improve medication management and adherence. 	a. Assigned staff randomly to demonstrate the medication service procedure at each site annually. This will be conducted using multiple methods such as work inspection, role play, review of past incident scenarios. Present and discuss identified areas requiring improvement during the departmental meeting. Record and share team meeting minutes for reference.	a. Percentage of active staff completing the medication service demonstration.	a. Achieve 100% completion of medication service demonstration by all active staff by December 31, 2025.	
									3. Conduct quarterly medication adherence group training sessions fostering continuous education and reinforcement of best practices among staff.	a. Arrange staff into breakout groups during the departmental team meetings to review past medication incidents. Facilitate inputs from staff to share medication adherence prevention strategies. Record and share meeting minutes with the team for reference.	 Number of staff training sessions held to review past medication incidents and share medication adherence prevention strategies. 	a. Conducted a total four (4) staff training sessions by December 31 2025.	,