

## Theme II: Service Excellence

### Measure Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of capable residents involved in plan of care and make the care decision	C	Rate per 100 / LTC home residents	In-house survey / Resident Satisfaction Survey 2022 and 2023	41.00	70.00	To meet and/or exceed the corporate average of 58%.	

### Change Ideas

Change Idea #1 Arrange training and education on updating care plans for the inter-professional team, including nurses and personal support workers (PSWs).

Methods	Process measures	Target for process measure	Comments
Provide training and education to the Inter-professional team on the strategies of updating care plans, such as what, when, and how to update care plans to capable residents.	The percentage of staff who will receive training.	100% of full time Inter-professional staff received training on updating care plans by December 31, 2023.	

Change Idea #2 Involve capable residents (Cognitive Performance Scale (CPS) score is from 0 or 2) in developing and modifying the care plan.

Methods	Process measures	Target for process measure	Comments
The Inter-professional team involves capable residents in developing and modifying a care plan, such as falls prevention, behaviour management, continence care, wound care, or any care routines by assessing the resident and reviewing the plan of care together. All communications will be documented in the electronic health record.	The percentage of capable residents will be involved in developing and modifying the care plan quarterly.	100% of capable residents involved in developing and modifying care plan by December 31, 2023.	

Change Idea #3 Seek feedback and suggestions from capable residents about their care plan and care needs, and share the feedback with Inter-professional team as appropriate.

Methods	Process measures	Target for process measure	Comments
<p>1. Primary PSWs seek feedback and suggestions from capable residents by using the "Communication with residents and family member log" about their current care plan and needs. 2. Staff share residents' feedback and suggestions about the care plan with the team as appropriate during team meetings and tracked by minutes. 3. Team members discuss residents' care needs and feedback and update the care plan in team meetings.</p>	<p>1. The percentage of capable residents who will provide feedback and suggestions on their care plan. 2. The percentage of residents' feedback and suggestions about the care plan will be shared with the team as appropriate. 3. The percentage of care plans which will be updated based on the feedback from residents.</p>	<p>1. 100% of capable residents who provided feedback and suggestions on their care plan. 2. 100% of residents' feedback and suggestions about the care plan were shared with the team. 3. 100% of care plans were updated based on the capable residents' feedback. All by December 31, 2023.</p>	

## Theme III: Safe and Effective Care

### Measure Dimension: Effective

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of newly admitted residents and families who respond positively to care transition experiences to long-term care.	C	Rate per 100 / LTC home residents	In house data collection / April 1 - December 2023	CB	CB	To establish a baseline.	

### Change Ideas

Change Idea #1 Identify the newly admitted residents' care needs and challenges prior to admission.

Methods	Process measures	Target for process measure	Comments
<p>1. Director of Resident Care (DRC) review newly admitted resident files to complete the "Pre-Admission Review Form" and identify the care challenges.</p> <p>2. DRC share the form and care challenges with the Inter-professional team, such as BSO, PT, and OT, accordingly.</p> <p>3. Inter-professional team prepare proactive measures, such as falls prevention, skin and wound care, and behaviour management in advance.</p>	<p>1. The percentage of "Pre-Admission Review Forms" will be completed with identified care challenges for newly admitted residents.</p> <p>2. The percentage of care challenges which will be shared with the Inter-professional team as appropriate.</p> <p>3. The percentage of newly admitted residents' proactive measures will be prepared.</p>	<p>1. 100% completed "Pre-Admission Review Forms" with identified care challenges for newly admitted residents.</p> <p>2. 100% of care challenges shared with the Inter-professional team as appropriate.</p> <p>3. 100% of newly admitted residents' proactive measures prepared. All by December 31, 2023.</p>	

Change Idea #2 Provide residents' care in a holistic and Inter-professional team approach during new admission.

Methods	Process measures	Target for process measure	Comments
1. Nurses will share the "Pre-Admission Review Form " information with staff during the shift report for the first 3 days of admission. 2. Inter-professional team will assess and develop residents' care plans during the new admission. 3. The Inter-professional team will discuss care challenges in collaboration with residents and families which will be documented.	1. The percentage of "Pre-Admission Review Form" will be shared with the staff during the shift report for the first 3 days of admission. 2. The percentage of new admission assessments and care plans will be completed by the Inter-professional team. 3. The percentage of discussions on care challenges held in collaboration with newly admitted residents and families.	1. 100% of the "Pre-Admission Review Form" were shared with the staff during the shift report for the first 3 days of admission. 2. 100% of new admission assessments and care plans were completed by the Inter-professional team. 3. 100% of discussions on care challenges were held with newly admitted residents and families. All by December 31, 2023.	

Change Idea #3 Evaluate care transition experiences of newly admitted residents and families after 4 to 6 weeks during the care conference.

Methods	Process measures	Target for process measure	Comments
The Social Worker or the Assistant Director of Resident Care will ask the newly admitted residents and families to share their experiences on the care transition during the admission care conference and document the information.	The percentage of newly admitted residents and families will share their care transition experiences during the admission care conference.	100% of newly admitted residents and families shared their care transition experiences by December 31, 2023.	