

Access and Flow | Efficient | Optional Indicator

Indicator #3	Last Year		This Year		
	Rate of ED visits for modified list of ambulatory care–sensitive conditions* per 100 long-term care residents. (Ballycliffe LTCR)	28.30	25	37.50	-32.51%
	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 Implemented Not Implemented

Additional education for Registered Staff: 1) Clinical Assessment and Professional Education for Registered Staff 2) Nursing Process Education using Scenarios

Process measure

- Percentage of staff that have completed the education.

Target for process measure

- 100% of all registered staff to complete.

Lessons Learned

All team members (100%) received education on SBAR, the nursing process, and clinical assessments.

Change Idea #2 Implemented Not Implemented

Families were also provided with education before sending residents to the hospital, outlining how the home can support their clinical, social, and emotional needs.

Process measure

- No process measure entered

Target for process measure

- No target entered

Lessons Learned

Residents were also given education prior to making the decision to transfer to the hospital.

Change Idea #3 Implemented Not Implemented

The home is in the process of recruiting an full-time in-house Nurse Practitioner.

Process measure

- No process measure entered

Target for process measure

- No target entered

Lessons Learned

The home continues to recruit.

Comment

The home will continue to focus on this indicator to better support the needs of the residents. The home is in the process of recruiting an full-time in-house Nurse Practitioner.

Equity | Equitable | Optional Indicator

	Last Year		This Year		
Indicator #2	CB	90	100.00	--	NA
Percentage of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and anti-racism education (Ballycliffe LTCR)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 **Implemented** **Not Implemented**

Educate staff on relevant equity, diversity, inclusion, and anti-racism education.

Process measure

- % of staff who complete the Surge Learning modules.

Target for process measure

- 90% of all staff will complete the training by the end of 2024.

Lessons Learned

100% of management and staff have completed Surge Learning.

Change Idea #2 **Implemented** **Not Implemented**

Increase awareness through planned events at the home that recognize equity, diversity, inclusion and anti-racism.

Process measure

- # of planned events that support equity, diversity, inclusion and anti-racism.

Target for process measure

- Home will have 1-2 planned events each quarter.

Lessons Learned

The home celebrated EDI and anti-racism year-round through a variety of observances, including New Year's Day, Martin Luther King Jr. Day, Lunar New Year, International Women's Day, Valentine's Day, Random Acts of Kindness, National Cancer Prevention Month, Black History Month, Diwali, Passover, Easter, Autism Awareness Month, Mother's Day, Father's Day, Grandparents Day, Mental Health Awareness Month, Jewish and Asian American Heritage Months, Pride, Indigenous Peoples' Celebrations, Thanksgiving, Rosh Hashanah, Hispanic Heritage Month, Italian Heritage Month, Bullying Prevention Month, Breast Cancer Awareness Month, LGBTQ+ Month, Veterans Day, Human Rights Day, Christmas Day, and Kwanzaa. These observances featured entertainment, storytelling, food, presentations, videos, posters, and games.

Change Idea #3 **Implemented** **Not Implemented**

Additional Education and celebrations to support DEI.

Process measure

- No process measure entered

Target for process measure

- No target entered

Lessons Learned

Staff learned about different cultures through the special events. The events elicited interest and questions and created an atmosphere of sharing.

Comment

100% of management and staff have completed Surge Learning. The home celebrated EDI and anti-racism throughout the year with a variety of observances, including New Year's Day, Martin Luther King Jr. Day, Lunar New Year, International Women's Day, Valentine's Day, Random Acts of Kindness, National Cancer Prevention Month, Black History Month, Purim, Diwali, Passover, Easter, Autism Awareness, Parkinson's Disease Month, Mother's Day, Father's Day, Grandparents Day, Mental Health Awareness Month, Jewish and Asian American Heritage Months, Pride, Indigenous Peoples' Celebrations, Thanksgiving, Rosh Hashanah, Hispanic Heritage Month, Italian Heritage Month, Bullying Prevention Month, Breast Cancer Awareness Month, LGBTQ+ Month, Veterans Day, Transgender Awareness Week, Human Rights Day, Christmas Day, and Kwanzaa. These celebrations included entertainment, storytelling, food, presentations, videos, posters, and games.

Safety | Safe | Optional Indicator

	Last Year		This Year		
Indicator #1	18.97	15.97	15.38	18.92%	12
Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment (Ballycliffe LTRC)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 **Implemented** **Not Implemented**

Review all residents on antipsychotic medication including a review of responsive expressions, a review of MDS coding and a review of medical conditions

Process measure

- Percentage of residents on an antipsychotics

Target for process measure

- Residents on an antipsychotic will be 15.97%

Lessons Learned

All residents on antipsychotic medication and residents with responsive expressions were reviewed by the interdisciplinary team.

A comprehensive review of medications, coding, diagnoses, and overall medical status was conducted.

The RAI Coordinator led the audit and provided education.

Change Idea #2 **Implemented** **Not Implemented**

Staff education will include training on GPA, U-First, the 3 D's, BSO Foundation training, PIECES, and education through Nurse Practitioner, geriatric recourses and other external providers.

Process measure

- No process measure entered

Target for process measure

- No target entered

Lessons Learned

GPA training was held in April and again in September. Additional training by external providers was also accessed by several staff members.

Comment

The home met the target and will continue to utilize interventions as noted above.