

**Access and Flow | Efficient | Optional Indicator**

Indicator #2	Last Year		This Year		
	Rate of ED visits for modified list of ambulatory care–sensitive conditions* per 100 long-term care residents. (Ballycliffe LTCR)	<b>37.50</b> Performance (2025/26)	<b>35</b> Target (2025/26)	<b>20.32</b> Performance (2026/27)	<b>45.81%</b> Percentage Improvement (2026/27)

**Change Idea #1**  Implemented  Not Implemented  In Progress

Ongoing education is provided to all registered staff on nursing assessments, care planning, and SBAR. The team collaborates directly with on-call physicians and Nurse Practitioners for high-risk residents requiring immediate medical care. STAT laboratory and diagnostic services are available as needed, and Satellite Pharmacy supplies medications that are not available in-house.

**Process measure**

- The goal is to reduce ER transfers from 37.5% to 35%. Transfers will only be made when a resident is acutely ill and requires hospitalization

**Target for process measure**

- The goal is to reduce ER transfers from 37.5% to 35% while enhancing the overall quality of life for residents.

**Lessons Learned**

The home expanded from 100 beds to 224 beds over a 10-week period. The transition of residents from the old Bally to the new Bally represented a significant change within a relatively short time frame. To support this growth, the home onboarded three additional attending physicians, and a nurse practitioner now attends weekly to provide extra support. Staffing was also expanded, with both registered staff and PSW teams doubling in size to meet the increased resident needs.

**Change Idea #2**  Implemented  Not Implemented  In Progress

Enhanced clinical skills of the Registered Staff to support complex needs in the home.

**Process measure**

- # of educational opportunities for staff.

**Target for process measure**

- To offer at least one education session per quarter to support clinical practice.

**Lessons Learned**

The home will continue to focus on this indicator to better support residents’ needs. With the increase in staffing, all new registered staff receive training on nursing assessments, care planning, and SBAR communication. The team will continue to collaborate directly with the homes physicians and Nurse Practitioners to manage high-risk residents requiring immediate medical attention. STAT laboratory and diagnostic services are available as needed, and the Satellite Pharmacy provides medications that are not stocked in-house.

**Comment**

- 1) Reduce fall related ED visits by providing preventive care and early interventions leading potentially avoidable ED visits.
- 2) Build capacity and improve overall clinical assessment to Registered Staff; through education of the most common transfers to ED
- 3) Development of IV program in the home
- 4) Involvement BSO/psychogeriatric team- with resident's with responsive expression to avoid transfer to ED

**Experience | Patient-centred | Custom Indicator**

	Last Year		This Year		
<b>Indicator #3</b>	<b>54.00</b>	<b>59</b>	<b>44.00</b>	<b>--</b>	<b>NA</b>
Resident satisfaction related to "I like the food here". (Ballycliffe LTCR)	Performance (2025/26)	Target (2025/26)	Performance (2026/27)	Percentage Improvement (2026/27)	Target (2026/27)

**Change Idea #1**  Implemented  Not Implemented  In Progress

Variety and Creative Meal Options

**Process measure**

- # of themed or creative meal options offered throughout the year

**Target for process measure**

- Aim to have at least one per month.

**Lessons Learned**

With the increase in staffing and the addition of new residents and families, it has taken time to build relationships and gather input from residents. We are working closely with the Resident Council and Food Committee to maintain open dialogue, obtain feedback, and seek suggestions on the regular menu as well as special menus.

**Change Idea #2**  Implemented  Not Implemented  In Progress

Enhancing Meal Presentation

**Process measure**

- Increase satisfaction score for "I like the food here".

**Target for process measure**

- 59% of residents will respond positively to the question "I like the food here".

**Lessons Learned**

Improve food presentation and plating, and create a pleasant, home-like dining experience by incorporating soft music, thoughtful table decorations, and staff education on pleasurable dining and plate presentation.

**Comment**

Education for staff on pleasurable dining, customer service and plate presentation.

Safety | Safe | **Optional Indicator**

	Last Year		This Year		
<b>Indicator #1</b>	<b>15.38</b>	<b>12</b>	<b>17.95</b>	<b>-16.71%</b>	<b>NA</b>
Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment (Ballycliffe LTRC)	Performance (2025/26)	Target (2025/26)	Performance (2026/27)	Percentage Improvement (2026/27)	Target (2026/27)

**Change Idea #1**  Implemented  Not Implemented  In Progress

Addition of a new full time BSO RPN to support the residents with responsive expressions will ensure that residents who receive antipsychotic medication have their medications reviewed on admission, quarterly and annually and will work with the MD to reduce medications.

**Process measure**

- Reduce antipsychotic medication use from 15% to 12 %

**Target for process measure**

- The reduction of antipsychotic medication improves quality of life for residents

**Lessons Learned**

The home expanded from 100 beds to 224 beds over a 10-week period. One of the neighborhoods includes a secure unit. The transition of residents from the old Bally to the new Bally represented a significant change, which occurred over a relatively short period of time. The home onboarded three additional attending physicians, and a nurse practitioner now attends the home weekly to provide extra support. In addition to the BSO RPN, the home has onboarded two full-time PSW BSO positions.

**Change Idea #2**  Implemented  Not Implemented  In Progress

The new BSO RPN is collaborating and engage with the team including physicians, pharmacists, nurses, PSWs, and behavioral specialists.

**Process measure**

- No process measure entered

**Target for process measure**

- No target entered

**Lessons Learned**

Additionally, staffing has been increased to support and serve 224 residents.

**Change Idea #3**  Implemented  Not Implemented  In Progress

In addition to the BSO RPN, the home has onboarded two full-time PSW BSO positions.

**Process measure**

- No process measure entered

**Target for process measure**

- No target entered

**Lessons Learned**

Additionally, staffing has been increased to support and serve 224 residents.

**Comment**

1) Gentle Persuasive approaches (GPA) training/education -establish GPA trainers, educators in the home

2) Development of plans of care, with non pharma logical approach - identification of triggers and interventions

The home did not meet targets due to the transition to a new home with increased bed capacity. Many residents prescribed antipsychotics prior to admission. We will continue to work with our partners on re-evaluating need and reducing where appropriate.

