

## Experience

### Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Overall resident experience survey scores related to the Dining Experience.	C	% / LTC home residents	In-house survey / 2026 Annual Survey	70.00	75.00	To improve satisfactions scores by 5%	

### Change Ideas

Change Idea #1 Introduce new menu options that increase variety and reflect resident cultural food preferences.

Methods	Process measures	Target for process measure	Comments
Obtain resident feedback by attending resident's council, food committee meetings and dining audits as to cultural food preferences being requested by residents and expand menu choices to reflect these preferences.	# of new cultural menu items added to the menu.	Add at least one new cultural food experience to the menu every month based on input from residents.	

Change Idea #2 Improve meal quality by regular taste testing. Introducing new products and doing a taste testing with residents.

Methods	Process measures	Target for process measure	Comments
Host taste testing events where residents can try different products and vote on preferences to incorporate into the menu.	# of Taste testing events held each quarter.	Host at least one tasting quarter.	

Change Idea #3 Enhance overall dining experience by obtaining resident feedback through audits, surveys and Resident Food Committee Meetings.

Methods	Process measures	Target for process measure	Comments
Complete dining experience audits as per designated schedule. Leadership presence in the dining room to gain feedback. Review Food Committee suggestions quarterly and incorporate feedback into the dining experience.	% of audits completed. # of complaints related to the dining experience.	100% of the scheduled audits will be completed. >5% of complaints related to dining.	

**Measure - Dimension: Patient-centred**

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident Experience Satisfaction Scores as they relate to the Outdoors.	C	% / LTC home residents	In-house survey / 2026 Annual Survey	84.00	88.00	Increase resident scores by 5%.	

**Change Ideas**

Change Idea #1 Enhance outdoor environment (seating, accessibility, landscaping) based on residents' preferences.

Methods	Process measures	Target for process measure	Comments
Gain feedback from residents and Families through councils or targeted interviews about what they feel will enhance the outdoor space. Initiate plans to improve outdoor areas based on feedback. Routine audits of outdoor environment to ensure safe, accessible, and aesthetically comfortable.	# of suggestions obtained from residents and families and the # of initiatives taken to improve the outdoor space. % of scheduled outdoor audits completed and analyzed.	Make at least one upgrade/improvement in 2026 based on resident and family feedback. 100% of outdoor space audits will be completed and analyzed.	

Change Idea #2 Increase opportunities for residents to utilize outdoor space.

Methods	Process measures	Target for process measure	Comments
Recreation team to try to book at least one outdoor event each month such as excursions off-site or activities held in outdoor spaces at the home when weather permits.	# of excursions or outside events each month.	At least one excursion or outdoor event each month.	

## Safety

### Measure - Dimension: Safe

Indicator #3	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 1 to September 30, 2025 (Q2), as target quarter of rolling 4-quarter average	4.41	4.20	Home is seeing an upward trend in antipsychotics and is committed to further enhancing strategies to maintain low usage and further reduce through use of non-pharmacological approaches.	

### Change Ideas

Change Idea #1 Enhance staff knowledge related to Dementia Care and the usage of non-pharmacological interventions to support Responsive Behaviours.

Methods	Process measures	Target for process measure	Comments
Train staff on therapeutic approaches to care and supporting resident living with Dementia through the Imagine Program.	# of sessions and # of staff trained through the Imagine program each year.	Host at least one session annually for at least 12-15 staff.	

Change Idea #2 Decrease antipsychotic medications for newly admitted residents who do not have a diagnosis of psychosis using a systematic approach.

Methods	Process measures	Target for process measure	Comments
Identify each new resident who is admitted with antipsychotics and complete a thorough review of history related to the use of the medication. Complete DOS charting and work with the pharmacy, physician, BSO, and nursing team to develop a plan to taper and eliminate use of psychotropics where clinically appropriate.	% of residents receiving psychotropics without a diagnosis of psychosis. # of residents newly admitted residents assessed.	100% of newly admitted residents will be assessed and plan developed. Will maintain or further reduce antipsychotic usage.	