

Access and Flow

Measure - Dimension: Efficient

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Rate of ED visits for modified list of ambulatory care-sensitive conditions* per 100 long-term care residents.	P	Rate per 100 residents / LTC home residents	CIHI CCRS, CIHI NACRS / October 1, 2024, to September 30, 2025 (Q3 to the end of the following Q2)	21.02	18.92	We aim to have a decrease of 10%	

Change Ideas

Change Idea #1 Nurse Led Outreach Team from St Joseph's Healthcare

Methods	Process measures	Target for process measure	Comments
Use the NLOT to prevent avoidable transfers through their support with with timely, high quality assessments for complex medical needs and hands-on treatment. NLOT will also enhance nursing skill and capacity in our home through collaboration, mentorship, education and resources.	Percentage of eligible residents with complex or acute changes in condition who receive an assessment or consultation from the NLOT.	100% of residents with complex or acute change in condition will be referred to NLOT	

Experience

Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents who responded positively to " I enjoy the taste of most of the food served to me"	C	% / LTC home residents	In-house survey / 2026	66.00	72.60	Home aims to have a 10% increase in the percentage of residents who responded positively to " I enjoy the taste of most of the food served to me"	

Change Ideas

Change Idea #1 Cooks to attend monthly food committee meetings.

Methods	Process measures	Target for process measure	Comments
Frequency of cooks attendance at monthly food committee meetings to receive feedback from the residents on quality of the food served	Percentage of monthly Food Committee meetings attended by at least one member of the dietary cooking team, and documentation of feedback or suggestions provided by cooks regarding menu items and food preparation.	A member of the dietary cooking team will attend 100% of scheduled monthly Food Committee meetings, with documented feedback provided at each meeting.	

Change Idea #2 Cooks to be present in dining rooms during meal times

Methods	Process measures	Target for process measure	Comments
Increase cooks presence in the dining room during meal times to get on the spot feedback from residents on the taste and quality of the food serves	Frequency of cooks in dining rooms. Percentage of residents spoken to during meals to gain feedback	Cooks to attend at least 1 meal a day. 50% of residents to provide on the spot feedback.	

Safety

Measure - Dimension: Effective

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents that have UTI	C	% / LTC home residents	CIHI portal / 2026	4.90	3.60	To bring us inline with the Provincial average.	

Change Ideas

Change Idea #1 Early identification of residents that are at risk for UTI's

Methods	Process measures	Target for process measure	Comments
Provide education to staff on signs and symptoms of UTIs.	# of staff who are trained on the signs and symptoms of a possible UTI.	>90% of staff will be trained.	

Change Idea #2 Medical Director to attend Resident Council Meetings

Methods	Process measures	Target for process measure	Comments
Medical Director to attend residents council meetings to talk about UTI's and when treatment is indicated vs not indicated.	Documented attendance of Medical Director at the residents council meeting.	Medical Director will attend at least on residents council meeting to review best practices as they relate to UTIs.	