

## Access and Flow

**Measure - Dimension: Efficient**

Indicator #1	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)	16.89	16.00	Home target is to reduce ED visits by 5% and to work towards provincial targets.	

**Change Ideas****Change Idea #1 Goals of Care/Expressed Wishes Education for Registered Staff**

Methods	Process measures	Target for process measure	Comments
Nursing Leadership including Resource Nurse to complete clinical education with all Registered Staff, Social Worker by June 2026 to be held at monthly meetings and offered at training in-services	# of staff will participate in receiving education by end of quarter 2, June 2026	100% of staff trained by June 30, 2026	

**Change Idea #2 Registered Staff Huddles following potential unnecessary ER visit**

Methods	Process measures	Target for process measure	Comments
Nurse Practitioner to review recent ER visits and provide follow up with Registered Staff	# of potential unnecessary ER visits reviewed month	Nurse Practitioner to review 2 potential unnecessary ER visits/month and hold 1 Huddle/month with Registered Staff	

## Experience

### Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident Experience Survey Scores related to Dining Experience.	C	% / LTC home residents	In-house survey / 2026 Annual Satisfaction Survey	59.00	65.00	Aim to increase overall satisfaction in Dining by relative 10%.	

### Change Ideas

#### Change Idea #1 Increase opportunities for Cooks to receive feedback from residents

Methods	Process measures	Target for process measure	Comments
Invite Cook to attend Monthly Resident Food Committee Meetings with Nutrition Manager to hear feedback regarding menu items and recipes. Cook to engage with residents in dining room during meal service.	# of meetings attended, # of walk through dining room during service	Cook to attend monthly Food Committee Meeting. Minimally Cook to provide walk through 1/week in dining room.	

#### Change Idea #2 Include cultural and themed dining experiences.

Methods	Process measures	Target for process measure	Comments
Map out 2026 calendar to include themed Day/Month with menu items and recreation and staff involvement.	# of cultural or themed dining experiences.	Schedule at least 1 themed or cultural dining experience each month.	

## Safety

**Measure - Dimension: Safe**

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of LTC home residents who fell in the 30 days leading up to their assessment	O	% / LTC home residents	CIHI CCRS / July 1 to September 30, 2025 (Q2), as target quarter of rolling 4-quarter average	21.90	20.00	Aim to reduce falls greater than 5% to move towards provincial average.	

**Change Ideas**

Change Idea #1 Involvement of inter-disciplinary team members in active engagement with residents on neighbourhoods

Methods	Process measures	Target for process measure	Comments
Provide Montessori Kits and Education for team members on each neighbourhood involving external partners with Behaviour Supports Ontario,	% of front line team members trained by Nursing Leadership, BSO RPN, External BSO to improve active engagement with residents	75% of front line team members will receive training focused on active engagement of residents	

Change Idea #2 Promote the fall prevention program strategies through targeted rounding, education and review at all departmental meetings.

Methods	Process measures	Target for process measure	Comments
Ongoing education focused on rounding, utilizing the 5 P's of falls prevention at all Department Meetings, monthly Falls Monthly Meetings	Focus on Falls Prevention through various methods.	Evidence through meeting minutes with the goal of meeting targets set for fall reduction.	