Access and Flow | Efficient | Priority Indicator

	Last Year		This Year	
Indicator #4 Rate of ED visits for modified list of ambulatory care–sensitive conditions* per 100 long-term care residents. (Riverview Gardens)	**8.70** Performance (2023/24)	**8.70** Target (2023/24)	**8.24** Performance (2024/25)	**8.24** Target (2024/25)

Change Idea #1 ☐ Implemented   ☑ Not Implemented

Identify and complete at least one process improvement plan (PIP) for a condition for which a resident was transferred to acute care that may be avoidable should the scenario present again.

Process measure

- Number of PIPs completed during the 2023/24 year.

Target for process measure

- The nursing team will work with members of the interdisciplinary team to complete at least one PIP for a condition for which a resident was transferred to acute care that may be avoidable should the scenario present again in the 2023/24 year.

Lessons Learned

We were challenged to complete this initiative as we were not fully staffed with nursing leadership and were faced with many competing priorities.

Experience | Patient-centred | Priority Indicator

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	Last Year		This Year	
Indicator #3 Percentage of residents who responded positively to the statement: "I can express my opinion without fear of consequences". (Riverview Gardens)	**76.34** Performance (2023/24)	**90** Target (2023/24)	**67.35** Performance (2024/25)	**74.25** Target (2024/25)

Change Idea #1 ☑ **Implemented**   ☐ Not Implemented

Ensure voiced concerns and complaints are addressed in a timely manner.

Process measure

- Number of concerns and complaints followed up and resolved within 10 days of concern being voiced.

Target for process measure

- 100% of concerns and complaints will be acknowledged within two business days, and completed within 10 days.

Lessons Learned

All complaints were managed within the timeline.

Change Idea #2 ☑ **Implemented**   ☐ Not Implemented

Review Resident Rights pertaining to making a complaint.

Process measure

- Minutes from Resident Council will reflect the discussion related to Resident Rights as well as the complaint process.

Target for process measure

- There will be at least two discussions about bringing forth concerns at Resident Council reflected in the minutes by March 31, 2024.

Lessons Learned

Resident Council did discuss Resident Rights (four per meeting) as well as the complaint process.

	Last Year		This Year	
Indicator #2 Percentage of residents responding positively to: "What number would you use to rate how well the staff listen to you?" (Riverview Gardens)	**44.09** Performance (2023/24)	**50** Target (2023/24)	**36.08** Performance (2024/25)	**39.68** Target (2024/25)

Change Idea #1 ☑ **Implemented** ☐ Not Implemented

Introduce person centred language throughout the home.

Process measure

- Number of staff that successfully respond to the knowledge check questions about person centred language incorporated into Fall training.

Target for process measure

- 100% of employees will correctly answer knowledge check questions about the use of person centred language in Fall training in 2023.

Lessons Learned

We did introduce this as planned, however recognize that one education session is not sufficient to enable change.

Change Idea #2 ☑ **Implemented** ☐ Not Implemented

Introduce training for customer service focus in an effort to promote a customer service culture.

Process measure

- Number of employees who complete Fall training 2023 and demonstrate an understanding of the content.

Target for process measure

- 100% of staff will complete customer service training module in Fall training 2023.

Lessons Learned

We did introduce this as planned, however recognize that one education session is not sufficient to enable change.

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Safety | Safe | Priority Indicator

	Last Year		This Year	
Indicator #1 Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment (Riverview Gardens)	**43.88** Performance (2023/24)	**35** Target (2023/24)	**40.87** Performance (2024/25)	**34** Target (2024/25)

Change Idea #1 ☐ Implemented ☑ **Not Implemented**

Riverview Gardens to establish a new interdisciplinary antipsychotic review committee to review all residents receiving antipsychotic medications and discontinue any as indicated.

Process measure

- Number of resident medication profiles reviewed per month.

Target for process measure

- 100% of residents receiving antipsychotic medications will have a medication review completed by December 31, 2023.

Lessons Learned

We were challenged to complete this initiative as we were not fully staffed with nursing leadership and we lacked sufficient capacity to undertake this improvement idea. We are now fully staffed and will be adding this improvement idea to the 2024/25 QIP.

Change Idea #2 ☐ Implemented ☑ **Not Implemented**

Review documentation for residents receiving antipsychotics.

Process measure

- Number of documentation reviews completed per month.

Target for process measure

- 100% of residents receiving antipsychotic medications will have their documentation reviewed by December 31, 2023.

Lessons Learned

We were challenged to complete this initiative as we were not fully staffed with nursing leadership and we lacked sufficient capacity to undertake this improvement idea. We are now fully staffed and will be adding this improvement idea to the 2024/25 QIP.

Report Accessed: March 28, 2024