

Access and Flow | Efficient | Priority Indicator

	Last Year		This Year	
Indicator #4	17.11	10	21.48	20
Rate of ED visits for modified list of ambulatory care–sensitive conditions* per 100 long-term care residents. (Albright Gardens Homes Inc.)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

Change Idea #1 Implemented Not Implemented

Creation or Adoption of educational materials that are designed especially for the various populations (staff, residents/family members that speak to this specific indicator.

Process measure

- Number of ED transfer reviewed by Leadership team on a monthly basis to review

Target for process measure

- 100 % of registered staff are aware and can speak in a generalized way about this indicator and can identify those ambulatory care-sensitive conditions. 100% of family members are given the educational material and the opportunity to ask questions and get more information if requested.

Lessons Learned

With the recruitment of NP for part of the year, we were able to focus on decreasing some of the hospital transfers.

Comment

Home has made some progress this initiative, however our plan for the year 2024 will show significant improvements with reduction in our hospital transfers this year.

Experience | Patient-centred | Priority Indicator

	Last Year		This Year	
Indicator #3	CB	80	83.78	90
Percentage of residents who responded positively to the statement: "I can express my opinion without fear of consequences". (Albright Gardens Homes Inc.)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

Change Idea #1 Implemented Not Implemented

Provide specific person centered training for all staff (mandatory)

Process measure

- During October annual training and atleast quarterly at departmental and home area meetings to provide education

Target for process measure

- To reach our goal of at least 80% resident feeling fearless in the home that currently live in.

Lessons Learned

Education to all staff was difficult, as the message was not getting through to everyone. However after a few attempts we were able to train our staff fully.

	Last Year		This Year	
Indicator #2	CB	80	86.49	90
Percentage of residents responding positively to: "What number would you use to rate how well the staff listen to you?" (Albright Gardens Homes Inc.)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

Change Idea #1 Implemented Not Implemented

1) Mandatory education for all staff on non-abuse training 2) Mandatory education for customer focused approach 3) Quarterly review of all resident's response on this very question, and design action plan accordingly 4) Move toward butterfly model of care

Process measure

- Number of residents/family surveys reviewed by the team

Target for process measure

- 80% resident will show a better outcome on the survey for the question about how well do the staff listen to you.

Lessons Learned

We hired a lot of new staff from different cultural backgrounds, so it took us with few attempts to train our staff.

Safety | Safe | Priority Indicator

	Last Year		This Year	
Indicator #1	28.71	17	31.63	NA
Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment (Albright Gardens Homes Inc.)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

Change Idea #1 Implemented Not Implemented

Review all residents with antipsychotics medication for all residents & assess the current needs of the medication for the resident with correct historic diagnosis for each

Process measure

- Number of residents who are on antipsychotics being reviewed on a monthly basis

Target for process measure

- 70% of the resident whom are getting antipsychotics with or without a diagnosis will see 50% reduction in the usage of antipsychotics medication over 6 months

Lessons Learned

The home did not take on this initiative, as we had been working on the other initiatives. We do have a new plan to work on this initiative with our NP on board.

Comment

This is the plan for the year 2024/25.