

Experience | Patient-centred | Custom Indicator

	Last Year		This Year		
Indicator #9	100.00	75	100.00	--	NA
Resident satisfaction-Would recommend the home. (Riverbend Place)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 **Implemented** **Not Implemented**

Maintain our high level of resident satisfaction.

Process measure

- Minimal concerns identified by residents.

Target for process measure

- Will be implemented by March 2024

Lessons Learned

We continue to strive for 100% resident satisfaction.

Change Idea #2 **Implemented** **Not Implemented**

Continue to maintain open communication with our residents

Process measure

- Satisfaction indicated on CSR forms from residents.

Target for process measure

- Will be implemented by March 2024

Lessons Learned

We complete a CSR for resident concerns and provide follow up to their concerns in a timely manner. Noted reduction in the number of concerns as the year has progressed.

Change Idea #3 **Implemented** **Not Implemented**

Continue resident council meetings as planned.

Process measure

- Resident counsel working cohesively with the home.

Target for process measure

- Will be implemented by April. 2024.

Lessons Learned

We hold regular resident council meetings to offer an opportunity for residents to voice their concerns/opinions.

	Last Year		This Year		
Indicator #12	100.00	70	50.00	--	NA
Resident-Satisfied with the quality of care provided by social work (Riverbend Place)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 **Implemented** **Not Implemented**

Provide the opportunity for social work assistance to be available for the residents in the home.

Process measure

- Social work services are available to the residents and families of our home.

Target for process measure

- Will be implemented by April. 2024

Lessons Learned

Provided education to residents and families that we do not have social worker in house, however, we can engage community supports if needed.

Change Idea #2 Implemented Not Implemented

Educate the residents, staff and families of the process to activate social work assistance.

Process measure

- Residents, families and staff will utilize the social work referral services.

Target for process measure

- Will be implemented by June. 2024.

Lessons Learned

Educated to ask staff if social work assistance is required and we will submit referral on their behalf.

Change Idea #3 Implemented Not Implemented

Seek feedback from the residents and families to ensure social work needs are met.

Process measure

- Improved resident outcomes related to social work issues.

Target for process measure

- Will be implemented by September. 2024

Lessons Learned

There have been no requests for social work this past year

Comment

Our home does not have in house Social workers. We are going to make accessibility to social work and education on the process of using social work if required, as a focus for our 2025 action plan.

	Last Year		This Year		
Indicator #11	91.70	95	85.70	--	NA
Resident-Satisfied with quality of care from Physiotherapist/Occupational Therapist (Riverbend Place)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 Implemented Not Implemented

Review the contract of with Physiotherapist/Occupational Therapist to assess for areas of potential improvement.

Process measure

- All areas will be addressed.

Target for process measure

- Will be implemented by June, 2024.

Lessons Learned

Our homes Physiotherapist is a contracted service who treats our residents on a referral basis. we have not had anyone ask for Occupational Therapist services this past year.

Change Idea #2 Implemented Not Implemented

Maintain open communication with Physiotherapist/Occupational Therapist.

Process measure

- Follow up to ensure referrals are completed in a timely manner.

Target for process measure

- Will be implemented by June 2024.

Lessons Learned

We need to continue to explore this communication and scheduling of services to potentially expand to occupational therapist services as required.

Change Idea #3 Implemented Not Implemented

Seek feedback from residents and families to ensure Physiotherapy/Occupational therapy needs are met.

Process measure

- Residents, families and staff will utilize the Physiotherapy/Occupational Therapy services, as appropriate.

Target for process measure

- Will be implemented by June, 2024.

Lessons Learned

Continuing to encourage families for feedback.

Indicator #10	Last Year		This Year		
	Resident satisfied with the timing and schedule of spiritual care services. (Riverbend Place)	91.70 Performance (2024/25)	95 Target (2024/25)	85.70 Performance (2025/26)	-- Percentage Improvement (2025/26)

Change Idea #1 Implemented Not Implemented

Provide an opportunity at residents' council meeting for resident input into the timing and schedule of spiritual care services.

Process measure

- Residents will attend and actively participate in meetings.

Target for process measure

- Will be implemented by May, 2024

Lessons Learned

Residents provide input into types of spiritual services offered which has been beneficial and helps us to identify their needs. Specific cultural prayer groups are in place as requested.

Change Idea #2 Implemented Not Implemented

Communicate spiritual program times and changes.

Process measure

- Residents will be aware of services and attend services of their choosing.

Target for process measure

- Will be implemented by May, 2024.

Lessons Learned

Activities calendar is posted and sent out to families and residents to increase communication.

Change Idea #3 **Implemented** **Not Implemented**

Seek feedback from the residents and families to ensure their spiritual needs are being met.

Process measure

- Residents, families and staff will utilize the spiritual services as they choose to attend.

Target for process measure

- Will be implemented by May, 2024.

Lessons Learned

Annual survey indicated an improvement in their satisfaction.

	Last Year		This Year		
Indicator #3	100.00	85	84.00	--	NA
Family satisfaction: Would recommend the home? (Riverbend Place)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 **Implemented** **Not Implemented**

Maintain our high level of family satisfaction.

Process measure

- Minimal concerns identified by families and residents.

Target for process measure

- Will be implemented by March, 2024.

Lessons Learned

Reduction noted in concerns in 2024.

Change Idea #2 **Implemented** **Not Implemented**

Continue open communication with our families.

Process measure

- Satisfaction indicated on CSR forms from residents and families.

Target for process measure

- Will be implemented by March, 2024.

Lessons Learned

Written responses provided to CSR forms complainant. Improved communication was noted as a result.

Change Idea #3 **Implemented** **Not Implemented**

Continue family council meetings.

Process measure

- Family participation in family council meetings.

Target for process measure

- Will be implemented by April, 2024.

Lessons Learned

Holding regular resident council meetings. Attempting to grow our family council was effective and will continue.

	Last Year		This Year		
Indicator #6	51.70	70	81.00	--	NA
Family-There is a good choice of continence care products. (Riverbend Place)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 **Implemented** **Not Implemented**

Review the types of continence products that are available thru our vendor.

Process measure

- The home has available different types of incontinence products for resident specific needs.

Target for process measure

- Will be implemented April, 2024.

Lessons Learned

Products were reviewed from vendor which was beneficial. Confirmed products available for use and this increased awareness of the products.

Change Idea #2 Implemented Not Implemented

Educate families and residents about the different types of continence products in our home.

Process measure

- Families and residents will have a solid understanding of our homes incontinence products.

Target for process measure

- Will be implemented by May, 2024.

Lessons Learned

We had the vendor come into the home to provide in-service/education, to residents and families, on the types and uses of incontinence products available here at the home which was very informative and helpful.

Change Idea #3 Implemented Not Implemented

Seek Feedback from the families and residents to ensure their resident specific continence needs are being met.

Process measure

- Families are educated on the products available and satisfied with the products available for their resident.

Target for process measure

- Will be implemented by September, 2024.

Lessons Learned

Feedback from residents and family was positive and stated they better understand the products and uses.

Indicator #5 Family-Satisfied with the quality of care from social work. (Riverbend Place)	Last Year		This Year		
	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)
	66.70	75	54.50	--	NA

Change Idea #1 Implemented Not Implemented

Educate the residents families and staff on the process to activate social work assistance.

Process measure

- Residents, families and staff will utilize the social work referral services.

Target for process measure

- Will be implemented by June, 2024.

Lessons Learned

education was provided to residents and families that we do not have an in house social worker, however educated on the process to engage community social work if requested/required.

Change Idea #2 Implemented Not Implemented

Provide the opportunity for social work assistance to be available to the residents in the home.

Process measure

- Social work services are available to the residents and families.

Target for process measure

- Will be implemented by April, 2024

Lessons Learned

education was provided to residents and families that we do not have an in house social worker, however educated on the process to engage community social work if requested/required.

Change Idea #3 **Implemented** **Not Implemented**

Seek feedback from the residents and families to ensure social work needs are being met.

Process measure

- Improved resident outcomes related to social work issues.

Target for process measure

- Will be implemented by September, 2024

Lessons Learned

Noted improvement in the resident and family awareness of the process to engage social work.

Comment

Our home does not have in house Social workers. We are going to make accessibility to social work and education on the process of using social work if required, as a focus for our 2025 action plan.

	Last Year		This Year		
Indicator #4	66.70	80	82.60	--	NA
Family-Continence care products keep the resident dry. (Riverbend Place)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 **Implemented** **Not Implemented**

Ensure a continence assessment is completed on all residents.

Process measure

- Incontinence assessment is accurate for all residents.

Target for process measure

- Will be completed by March, 2024.

Lessons Learned

reassessed all resident continence needs individually, and this was a successful strategy which will continue.

Change Idea #2 **Implemented** **Not Implemented**

Review the type of continence products that residents are currently using.

Process measure

- Residents will be in the proper incontinence product to suit their specific needs.

Target for process measure

- Will be implemented by May, 2024.

Lessons Learned

Ensured all residents are in proper product based on their needs, which promoted resident comfort and this will continue.

Change Idea #3 **Implemented** **Not Implemented**

Seek feedback from the residents and families to ensure incontinence needs are being met.

Process measure

- Residents skin is healthy and there are minimal issues related to leaking products.

Target for process measure

- Will be implemented by September, 2024.

Lessons Learned

Noted improvement related to incontinence needs and family concerns.

Safety | Safe | Optional Indicator

	Last Year		This Year		
Indicator #7	25.34	15	18.30	27.78%	15
Percentage of LTC home residents who fell in the 30 days leading up to their assessment (Riverbend Place)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 **Implemented** **Not Implemented**

Implement specific activity program at afternoon change of shift for residents who are high risk for falls.

Process measure

- # of residents reviewed for activity needs/preferences weekly # of activity programs that occur during change of shift in afternoon weekly.

Target for process measure

- Specific activity program at afternoon change of shift will be implemented by June 2024.

Lessons Learned

Increased our activity programs during change of shift and have noticed a decrease in the number of falls during those times.

Change Idea #2 **Implemented** **Not Implemented**

Conduct environmental assessments of resident spaces to identify potential fall risk areas and address areas for improvement.

Process measure

- # of environmental assessments completed monthly. # of identified deficiencies from assessments that were corrected monthly.

Target for process measure

- Environmental risk assessments of resident spaces to identify fall risk will be completed by June 2024.

Lessons Learned

Environmental assessments are now incorporated as part of post fall assessment and JH&S monthly audits

Comment

We are continuing to have falls prevention as our focus for the 2025 improvement plan.

Indicator #8	Last Year		This Year		
Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment (Riverbend Place)	26.47	17.30	X	--	NA
	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 Implemented Not Implemented

Medication reviews completed for all residents currently prescribed antipsychotics.

Process measure

- # of residents reviewed monthly. # of plans of care reviewed that have supporting diagnosis # of reduction strategies implemented monthly.

Target for process measure

- All residents currently prescribed antipsychotics will have a medication Review completed by July 2024 .

Lessons Learned

Complete review of all residents was done and team worked with MD to assess need for medication and ensure diagnosis was current.

Change Idea #2 Implemented Not Implemented

Provide educational material to families and/or residents on antipsychotics and the importance of minimizing use.

Process measure

- # of families provided with best practice information on reducing antipsychotics monthly. # of tour and admission packages provided with antipsychotic reduction information included monthly.

Target for process measure

- Educational material will be provided to families and/or residents on antipsychotics and important of minimizing use by Sept 2024.

Lessons Learned

This is discussed at resident and family council as well as during care conferences as required. This strategy was successful.

Safety | Safe | **Custom Indicator**

	Last Year		This Year		
Indicator #1	0.00	2.50	0.00	#Error	NA
% of LTC residents with restraints (Riverbend Place)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 **Implemented** **Not Implemented**

Review current restraints and determine plan for trialing alternatives to restraints.

Process measure

- # residents reviewed monthly. # of meetings held with families/residents to discuss alternatives monthly. # of action plans in place for reduction of restraints in collaboration with family/resident monthly.

Target for process measure

- 100% of restraints will be reviewed and plans implemented for trialing alternatives by Sept 2024.

Lessons Learned

The use of restraints was reviewed for all residents and alternatives were provided. This was effective at decreasing our restraints in our home.

Change Idea #2 **Implemented** **Not Implemented**

2) Re-educate staff on restraint policy and use of alternatives to restraints.

Process measure

- # of education sessions held monthly.

Target for process measure

- 100% of staff will be re-educated on restraint policy and alternatives to restraints by Sept 2024.

Lessons Learned

Staff were all educated on the restraint policy which increased awareness and helped to us to decrease restraint usage.

Indicator #2	Last Year		This Year		
% of LTC residents with worsened ulcers stages 2-4 (Riverbend Place)	11.10	2	0.00	--	NA
	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 **Implemented** **Not Implemented**

Review current bed systems/surfaces for residents with PURS score 3 or greater.

Process measure

- # of residents with PURS score 3 or greater # of reviews completed of bed surfaces/mattresses monthly # of bed surfaces /mattresses replaced monthly.

Target for process measure

- A review of the current bed systems/surfaces for residents with PURS score 3 or greater will be completed by August 2024.

Lessons Learned

All residents skin was assessed. We reviewed the need for new bed systems and ordered these items. New bed systems were implemented for all assessed residents which was a successful strategy.

Change Idea #2 **Implemented** **Not Implemented**

Improve Registered staff knowledge on identification and staging of pressure injuries .

Process measure

- # of education sessions provided monthly for Registered staff on correct staging of pressure injuries.

Target for process measure

- 100% of registered staff will have received education on identification and staging of pressure injuries by Sept 2024.

Lessons Learned

Various education sessions have been provided to staff from in house and external education providers which helped to improve staff knowledge about pressure injuries.

