

Access and Flow | Efficient | **Optional Indicator**

Indicator #6	Last Year		This Year		
	15.83	15.50	21.17	-33.73%	NA
Rate of ED visits for modified list of ambulatory care–sensitive conditions* per 100 long-term care residents. (West Park LTC Centre)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 ☒ Implemented ☐ Not Implemented

All emergency department transfers are to go through nursing management and/or charge nurse prior to transfer.

Process measure

- # of emergency department transfers sent through this process.

Target for process measure

- All emergency department transfer to utilize this process.

Lessons Learned

Having potential ED transfers reviewed through nursing management and/or charge nurse gave us a better understanding of why the residents were going out and to determine if it was a suitable transfer.

Change Idea #2 ☒ Implemented ☐ Not Implemented

Improve physician's decision-making process in reducing avoidable emergency department transfers.

Process measure

- 1. # of physician's educated 2. # of emergency department transfers discussed at MAC and PAC Committee

Target for process measure

- 1. All physicians to be educated 2. All emergency department transfers to be discussed

Lessons Learned

It's important to have a collaborative support from the physicians to ensure the goals of the resident, family and facility are achieved. Using technology such as zoom is a helpful tool to engage the physicians more frequently.

Change Idea #3 ☐ Implemented ☒ Not Implemented

Recruit 1 Nurse Practitioner

Process measure

- 1. NP hired 2. Initiate discussion

Target for process measure

- 1. Successfully recruit 1 Nurse Practitioner 2. Discussion was held

Lessons Learned

Home continues to recruit a Nurse Practitioner by posting on various sites such as Indeed, NPAO, OLTCC and Google/Meta campaign. Challenges include not enough NP's and interest in working in the Long-Term Care sector.

Comment

Continue to work with Humber River Hospital to support using the NLOT team. Home will continue recruiting efforts.

Experience | Patient-centred | Custom Indicator

Indicator #2	Last Year		This Year		
	28.60	68.30	95.00	--	NA
Improved quality of resident and family services (West Park LTC Centre)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 ☒ Implemented ☐ Not Implemented

Increased visibility of the homes Social Worker

Process measure

- 1. # of residents and families educated on the services that the Social Worker provides
- 2. # of Resident Councils attended
- 3. # of residents and families met with at the meet and greet
- 4. # of times highlighted in monthly newsletter

Target for process measure

- 1. 100% of residents to be educated on the services that the Social Worker provides, that have a CPS of 3 or less
- 2. 70% of Resident Councils to be attended
- 3. 20% of residents and 10% of families met with at the meet and greet
- 4. Highlight Social Worker in 3 newsletters.

Lessons Learned

Educating the residents and families through resident and family council helped significantly.

Comment

All managers to attend at least one resident and family council meeting per year.

Indicator #3	Last Year		This Year		
	48.00	69.20	90.80	--	NA
Improved quality of resident services (West Park LTC Centre)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 ☒ Implemented ☐ Not Implemented

Increased visibility of the homes Dietician

Process measure

- 1. # of residents educated on the services that the that the Dietician provides. 2 # of Resident Councils attended. 3. # of residents met with at the meet and greet 4. # of times highlighted in monthly newsletter.

Target for process measure

- 1. 100% of residents to be educated on the services that the Dietician provides, that have a CPS of 3 or less. 2. 70% of Resident Councils to be attended. 3. 20% of residents met with at the meet and greet 4. Highlight Dietician in 3 newsletters.

Lessons Learned

Educating the residents and families through resident and family council helped significantly.

Comment

All managers to attend at least one resident and family council meeting per year.

Indicator #4	Last Year		This Year		
	73.70	75	82.40	--	NA
Overall, I am satisfied with communication from home leadership (West Park LTC Centre)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 ☒ Implemented ☐ Not Implemented

Improved communication from leadership team to residents

Process measure

- 1. # of managers that attended 1 Residents Council meeting 2. # of residents educated on where to find information regarding the home's events/activities/memos and; who they can go to/how to contact if they have questions

Target for process measure

- 1. All managers to attend 1 Residents Council meeting 2. All residents who've attended Residents Council meeting to be educated on where to find information regarding the home's events/activities/memos and; who they can go to/how to contact if they have questions

Lessons Learned

Having the managers attend resident council meeting and educating them on where they are and what they do helped significantly.

Comment

We will continue this practice to ensure residents are communicated to.

Indicator #5	Last Year		This Year		
	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)
Percentage of LTC home residents who fell in the 30 days leading up to their assessment (West Park LTC Centre)	9.37	9	9.63	-2.77%	9.40

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

High risk fall residents to be posted in each unit's nursing station for staff awareness.

Process measure

- 1. # of staff educated about the poster 2. # of posters within the nursing station

Target for process measure

- 1. 100% of active staff to be education 2. All nursing stations to have this posted and kept up to date

Lessons Learned

Putting a poster up does not always gain much traction however, providing education about it helped staff's understanding regarding what it is for and to be aware.

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

Implement strategic programs during identified high risk fall times.

Process measure

- 1. # of high risk residents identified 2. # of changes in programs made as a result of the meetings 3. # of structured programs during high risk falls times

Target for process measure

- 1. All high risk residents to be identified 2. All high risk fall times to be identified 3. All high risk fall resident to attend these programs

Lessons Learned

Indicating high risk residents was an important step to understanding who to involve in these strategic, structured programs.

Comment

Due to the success, the home will continue these process measures.

Safety | Safe | Custom Indicator

Indicator #1	Last Year		This Year		
	11.70	11	12.90	--	NA
% of residents with worsened symptoms of depression (West Park LTC Centre)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 ☒ Implemented ☐ Not Implemented

Decrease the number of residents who have worsened symptoms of depression.

Process measure

- 1. # of residents reviewed and discussed 2. # of staff educated on the signs and symptoms of depression. 3. # of times this indicator was changed due to inaccurate coding

Target for process measure

- 1. All residents who flag in this indicator to be reviewed and discussed 2. All active staff to be educated on the signs and symptoms of depression 3. No inaccurate coding expected.

Lessons Learned

Current performance indicated is from Q2 2024 (July-Sept 2024). Resident who fit in this category are reviewed; staff have been educated, and coding is accurate.

Comment

CIHI data not yet available for entire 2024 year. Current process measures will continue to decrease indicator. Q1 2024 (Apr-Jun 2024) was 11.90%.