

Experience | Patient-centred | Custom Indicator

	Last Year		This Year	
Indicator #1	CB	CB	CB	NA
Palliative Care - End of Life (Kipling Acres)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

Change Idea #1 Implemented Not Implemented

Palliative Care Planning and End of Life

Process measure

- Palliative Care Plan and End of Life as appropriate

Target for process measure

- 85% of residents with documented plans

Lessons Learned

Training was provided to staff by CLRI to support staff in developing goals of care. In 2024 will focus on palliative care education for families since talking about end of life is difficult.

Comment

Palliative care protocol will evolve in 2024.

Indicator #4	Last Year		This Year	
	CB	CB	CB	NA
Resident/Family Experience - Admission (Kipling Acres)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

Change Idea #1 Implemented Not Implemented

Admission process streamlined and buddy system

Process measure

- % of residents/families with positive admission experience

Target for process measure

- 85% - 90% of resident/families satisfied

Lessons Learned

Admission package updated and implemented, but will continue to streamline information as package is still a bit lengthy.

Change Idea #2 Implemented Not Implemented

To implement interprofessional suicide risk assessment and management program

Process measure

- % of interprofessional care team trained

Target for process measure

- The target for this process measure is 85%

Lessons Learned

Training: Trained 309 staffs in 57 sessions for all departments; 3-step methodology
 Staff willingness to learn and apply the knowledge.

Lessons learned: sustainability plan will need to include an evaluation of processes implemented to ensure continuation.

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

To implement interprofessional Palliative Care Approach at Admission

Process measure

- % of interprofessional care team trained

Target for process measure

- The target for this process measure is 85%

Lessons Learned

Training provided to staff by CLRI. Education will continue in 2024 by divisional leads.

Comment

Sustainability plan involves bi-weekly, and quarterly audits for quality assurance and compliance.

	Last Year		This Year	
Indicator #2	72	80	88	NA
Resident Experience - Food (Kipling Acres)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

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

Monthly Resident Menu Addition

Process measure

- % of residents/family satisfied with food served

Target for process measure

- 80 -85% satisfaction

Lessons Learned

Purchase of new hot transportation carts by Q3 & Q4 improved resident 100% satisfaction.

Food taste improved from 76% to 92% satisfaction rate with the implementation of the 2023 Menu along with the permanent changes to cater resident’s requests.

Resident Meal Choice implemented monthly.

Opportunity to enhance monthly food evaluation process.

Comment

Progress made and will continue engaging with residents and families.

	Last Year		This Year	
Indicator #3	88	90	84	NA
Resident Experience - Laundry and Personal Belongings (Kipling Acres)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

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

Personal item bags

Process measure

- Percentage of missing items or complaints/concerns

Target for process measure

- Less than 5 complaints per month

Lessons Learned

Tried secured storage boxes for personal items on one home area. Successful. No losses of items since then.

Process for #3 personal items is still being reviewed as it requires specialized equipment to accommodate the change in laundering the items. This project included IPAC, laundry and nursing who are collaborating to finalize a process to meet all regulatory requirements.

The resolved bleach was implemented with great success.

Comment

Excellent change ideas, and residents are experiencing less lost items. Experience rating will continue to be an area of focus in 2024.

	Last Year		This Year	
Indicator #5	CB	CB	50	NA
Toronto Public Health Dental Program Pilot (Kipling Acres)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

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

Consent to screen for dental care needs

Process measure

- % of residents screened and % of residents who received treatment via Toronto Public Health

Target for process measure

- 70% - 85% of residents screened

Lessons Learned

Increase access to dental screening and treatment for low income residents.

Bedside treatments/exams are most convenient, and seemingly easier to manage on the home areas.

Parking the van near the entrance was excellent for accessibility.

Increase promotion and advertising would help to promote knowledge and increase awareness of the program.

Larger homes need more time to collect consent forms and reaching out to families.

Communication with PGT is a challenge and creates a lot of delays in enrolling residents as well and providing treatments.

Comment

Promotion of dental program and increase dental screening.