

Experience | Patient-centred | Custom Indicator

	Last Year		This Year	
Indicator #3	CB	CB	CB	NA
Resident/Family Experience - Admission (Cummer Lodge)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

Change Idea #1 Implemented Not Implemented

Care Conference Letter provided at Admission to support Palliative Care Planning and reduce Emergency visits at End of Life

Process measure

- Monitor and collect feedback from new residents/families

Target for process measure

- 70% of families/residents comfortable with discussion of Palliative Care Planning

Lessons Learned

Introduction of Palliative Care Planning through Care Conference letter delivered on admission. Lessons learned include providing education on palliative care planning to the team members meeting with the family members/residents when delivering the letter. Home will continue providing this information on the day of move in.

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

85% of the interprofessional care team completed the training module. Lessons learned include ensuring that new staff are provided with the education and that current staff receive refresher training to ensure sustainability of the assessment tool.

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

Lessons learned include expanding the education to additional team members and providing refresher education sessions with the current team to assist with facilitating early conversations on the palliative approach to care

Comment

Resident centered care and safety will continue in 2024.

	Last Year		This Year	
Indicator #1	83	86	95	NA
Resident Experience - Food & Dining (Cummer Lodge)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

Change Idea #1 Implemented Not Implemented

Meet with residents and Resident's Council on a regular basis to gather feedback on preferences, likes/dislikes

Process measure

- Satisfaction with Menu

Target for process measure

- 85 % Satisfaction with new Menu

Lessons Learned

Lessons learned include continuing Food Committee meetings in conjunction with resident council members and to continue meal and snack time audits in the dining room to seek on-the-spot feedback during meal time.

Comment

Feedback and suggestions well received.

Indicator #2	Last Year		This Year	
	Resident Experience - Laundry and Personal Belongings (Cummer Lodge)	80 Performance (2023/24)	86 Target (2023/24)	89 Performance (2024/25)

Change Idea #1 Implemented Not Implemented

Meet with residents and Resident's Council on a regular basis to gather feedback, as well as track number of lost items, and items replaced

Process measure

- Number of missing/lost items replaced

Target for process measure

- Less than 10 lost items (complaints/concerns)

Lessons Learned

Lessons learned include ensuring new residents, family members and staff are aware of the labelling process to prevent items from being missing/lost.

Comment

Continuous promotion and education will support sustainability.