cess and Flow | Efficient | **Optional Indicator**

	Last Year		This Year		
Indicator #6					
ate of ED visits for modified list of ambulatory care–sensitive onditions* per 100 long-term care residents. (The Salvation rmy Ottawa Grace Manor)	**18.06** Performance (2024/25)	**14** Target (2024/25)	**21.95** Performance (2025/26)	**-21.54%** Percentage Improvement (2025/26)	**NA** Target (2025/26)

Change Idea #1 ☑ Implemented ☐ Not Implemented

Addition of Nurse Practitioner to the team in conjunction with Ottawa Hospital

Process measure
- review monthly the number of resident ED visits and follow up with team on what visits could have been avoidable

Target for process measure
- Less than 4 avoidable ED visits per month

Lessons Learned

Success: NP was able to assess residents and make recommendations/orders

Challenges: families /residents wanting to go to hospital even with reassurance of mobile x ray, stat blood work, on call physicians

omment

Jucation to families
egistered staff to use S Bar

uity | Equitable | Optional Indicator

	Last Year		This Year		
dicator #5 ercentage of staff (executive-level, management, or all) who ave completed relevant equity, diversity, inclusion, and anti- cism education (The Salvation Army Ottawa Grace Manor)	**CB** Performance (2024/25)	**100** Target (2024/25)	**91.67** Performance (2025/26)	**--** Percentage Improvement (2025/26)	**100** Target (2025/26)

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

Ensuring that all staff complete annual education on equity, diversity, inclusion, and anti-racism education.

Process measure

- completion of Surge Learning

Target for process measure

- 100% of staff to complete dy Dec 1 2024 including management team

Lessons Learned

challenges completetion
successes education placed on Surge learning was powerful

omment

ncouragement for everyone to complete 2025

perience | Patient-centred | **Optional Indicator**

	Last Year		This Year		
idicator #3 ercentage of residents responding positively to: "What umber would you use to rate how well the staff listen to you?" he Salvation Army Ottawa Grace Manor)	**CB** Performance (2024/25)	**CB** Target (2024/25)	**CB** Performance (2025/26)	**--** Percentage Improvement (2025/26)	**NA** Target (2025/26)

Change Idea #1 ☑ Implemented   ☐ Not Implemented

The question "How well do the staff listen to me " was not included in our previous survey. Survey will be updated to include.

Process measure
- Responses to be reviewed and action plan if required based on results

Target for process measure
- Annual survey will be updated to reflect the question "How well do the staff listen to me"

Lessons Learned

responses all postive , we will continue to ask this question for 2025 survey

omment

e will continue to ask this question on surveys for 2025

	Last Year		This Year		
Indicator #4	**CB**	**25**	**CB**	**--**	**NA**
Percentage of residents who responded positively to the statement: "I can express my opinion without fear of consequences". (The Salvation Army Ottawa Grace Manor)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 ☑ Implemented   ☐ Not implemented

Annual survey to be updated to include question "I can express my opinion without fear of consequences".

Process measure

- Responses to be reviewed and action plan if required based on results

Target for process measure

- Annual survey will be updated to reflect the question "I can express my opinion without fear of consequences".

Lessons Learned

we will continue asking question in 2025

Comment

will continue to ask this question and review results

fety | Safe | Optional Indicator

	Last Year		This Year		
Indicator #1 Percentage of LTC home residents who fell in the 30 days leading up to their assessment (The Salvation Army Ottawa Grace Manor)	**13.88** Performance (2024/25)	**12** Target (2024/25)	**14.01** Performance (2025/26)	**-0.94%** Percentage Improvement (2025/26)	**NA** Target (2025/26)

Change Idea #1 ☑ Implemented ☐ Not Implemented

Reconfiguration of the restorative care program, including Behavioral Support in assessments with any resident with unsettled behaviors, post fall delirium assessment.

Process measure

- monthly number of falls reviewed and discussed with team and Quality Improvement Committee

Target for process measure

- Goal is 20 or less falls a month.

Lessons Learned

Success:education, restorative, additional BSO

Challenges: enough days dedicated to our programs, work load, outbreaks, staff storages

Change Idea #2 ☑ Implemented ☐ Not Implemented

added a third BSO

Process measure

- No process measure entered

Target for process measure

- No target entered

Lessons Learned

omment

ring staff
udent placement/recruitment

	Last Year		This Year		
Indicator #2 ercentage of LTC residents without psychosis who were given ntipsychotic medication in the 7 days preceding their resident ssessment (The Salvation Army Ottawa Grace Manor)	**27.12** Performance (2024/25)	**24** Target (2024/25)	**18.50** Performance (2025/26)	**31.78%** Percentage Improvement (2025/26)	**NA** Target (2025/26)

Change Idea #1 ☐ Implemented ☐ Not Implemented

To update our current psychotropic assessment review to include better follow up with family/resident and physician.

Process measure

- by decreasing in the number of residents receiving antipsychotic medication without psychosis.

Target for process measure

- reduce the number of residents receiving antipsychotic medication without psychosis.

Lessons Learned

not worked on last year

omment

as not part QIP plan