



Excellent Care for All
Quality Improvement Plans 23/24 (QIP): Long-Term Care Progress Report on the 2022/23 QIP

The Progress Report is a tool that will help organizations make linkages between change ideas and improvement, and gain insight into how their change ideas might be refined in the future. The new Progress Report is mostly automated, so very little data entry is required, freeing up time for reflection and quality improvement activities.

Ontario Health (OH) will use the updated Progress Reports to share effective change initiatives, spread successful change ideas, and inform robust curriculum for future educational sessions.

Measure/Indicator from 2022/23	Org Id	2021-22 Performance	2022-23 Target	Current Performance 2023	Comments Change Ideas
Do residents feel they can speak up without fear of consequences? (%; Residents; 2022-23; In-house survey)	53159 Bethammi Nursing Home	CB	CB	29.50 (2022-3 Survey)	New question added to our in-house Client Satisfaction Survey. "Do you feel that you can raise a concern about staff without it affecting your (or your family member's) care? Yes Definitely Both long-term care homes have implemented Family Support Groups.
Do residents feel they can speak up without fear of consequences? (%; Residents; 2022-23; In-house survey)	54472 Hogarth Riverview Manor	CB	CB	32.80 (2022-3 Survey)	Hogarth Riverview Manor has implemented a Resident and Family Liaison Role to work directly with residents and families to proactively address any concerns. This indicator will continue as a priority for 2023-24

Measure/Indicator from 2022/23	Org Id	2021-22 Performance	2022-23 Target	Current Performance 2023	Comments Change Ideas
How often did staff involve you in planning your (or your family member's care)? Always (%; Residents; 2021-22; In-house survey)	53159 Bethammi Nursing Home	66.70	68.00	53.50 (2022-23 Survey)	Both long-term care homes have implemented pre-admission meetings or calls with residents and families as well as post-admission calls to families within 24 hours of admission. This indicator will continue as a priority for 2023-24
How often did staff involve you in planning your (or your family member's care)? Always (%; Residents; 2021-22; In-house survey)	54472 Hogarth Riverview Manor	36.50	38.00	43.10 (2022-23 Survey)	
How often did staff listen carefully to you? Always (%; Residents; 2021-22; In-house survey)	53159 Bethammi Nursing Home	69.40	70.80	63.60 (2022-23 Survey)	Both long-term care homes monitor and report call bell response times to staff, to improve responsiveness to resident needs and have implemented Leader walkabouts to receive feedback from residents on areas for improvement.
How often did staff listen carefully to you? Always (%; Residents; 2021-22; In-house survey)	54472 Hogarth Riverview Manor	44.00	45.00	46.40 (2022-23 Survey)	This indicator will continue as a priority for 2023-24 QIP.
Number of workplace violence incidents reported by workers (as defined by OHSA) within a 12 month period. (Count; Worker; Jan to Dec 2021; In house data collection)	53159 Bethammi Nursing Home	17.00	17.00	18.00 (Jan-Dec 2022)	Both long-term care homes on track to have over 90% of staff trained in Gentle Persuasive Approach (GPA). This indicator will continue as a priority for 2023-24 QIP.
Number of workplace violence incidents reported by workers (as defined by OHSA) within a 12 month period. (Count; Worker; Jan to Dec 2021; In house data collection)	54472 Hogarth Riverview Manor	205.00	205.00	100.00 (Jan-Dec 2022)	

Measure/Indicator from 2022/23	Org Id	2021-22 Performance	2022-23 Target	Current Performance 2023	Comments Change Ideas
The proportion of residents with a progressive, life-limiting illness, who are identified to benefit from palliative care, who subsequently have their palliative care needs assessed using a comprehensive and holistic assessment. (%; Residents; Oct to Dec 2021; In house data collection)	53159 Bethammi Nursing Home	100.00	100.00	91.00 (Oct-Dec 2022)	Both long-term homes have sustained a process to identify individuals who would benefit from a palliative care assessment and ensure assessment is completed. This indicator will continued to be monitored by each home through their pain and palliative care program. This indicator will not be included in QIP 2023-24
The proportion of residents with a progressive, life-limiting illness, who are identified to benefit from palliative care, who subsequently have their palliative care needs assessed using a comprehensive and holistic assessment. (%; Residents; Oct to Dec 2021; In house data collection)	54472 Hogarth Riverview Manor	43.00	80.00	95.00 (Oct-Dec 2022)	