

		MEASURE: How do we know that a change is an improvement?						CHANGE: What changes can we make that will result in the improvements we seek?				
Objective	Measure/Indicator	Population	Period	Current performance	Target	Target justification	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Goal for change ideas	Comments	
	What is the objective of the quality improvement initiative?	What is the indicator that will tell you whether an improvement is happening?	What population are you targeting for the quality improvement initiative?	What is the time period representing the current performance?	What is the current performance in the time period specified?	What are you aiming for at the end of the fiscal year? What does the organization aspire to?	What is the rationale for selecting the target? How do you justify it? Provincial benchmark?, theoretical best?, Provincial Average?, Peer Leading Organization?	What initiatives will you put in place that will lead to the improvement being sought?	What step-by-step methods will you be using to track progress on the planned initiatives?	What measures will allow you to evaluate when an activity has been accomplished? Processes must be measurable as rates, percentages and/or numbers over specific timeframes	What is the numeric goal specifically related to the process measure?	Additional Information?
Timely and Efficient Transitions	To reduce avoidable transfers to Emergency Departments	# of ED transfers (internal data)	TCB and Binbrook	2022	208 Clients 60 ED transfers 26,497 # of bed days Rate: 0.226%	Target to be determined	Decrease number of ED transfers	Education on ED avoidance including resources for clients, families and staff.	Develop a tool or resource to support care planning about alternatives to hospital, talking about wishes and goals of care, process when ED transfer is considered as part of service planning and reviewed annually (at intake for new admits)	Development of tool # of nursing staff completed education # of clients (families) provided education	85% Nurses to completed education 100% of clients/families received resources/ education	
								Implement vaccine program at Binbrook site	(1) Complete process for obtaining approval for publicly funded vaccines (PFV) (2) Obtain baseline data on clients vaccine status for Influenza, pneumovax, shingles etc (3) Develop a vaccine champion to complete champion training	(1) Approval of application pending (2) Collecting baseline data (3) Completion of vaccine champion program	(1) Complete by August 2023 (2) Complete by October 2023 (3) October 2023	
								Incorporate "Comfort Care Rounds" and 4Ps (pain, position, personal needs, placement) by Personal Attendant/ PSA staff	Comfort Care Rounds (with 4 Ps) to be incorporated into existing safety checks for congregate sites based on service plan 4P to be incorporated into all service visits by care team	Training completed at all sites for all care team staff	100% of care staff to be trained in 2023	

								Interdisciplinary team at TCB sites to review all clients returning from hospital/ED visit to identify: (1)candidates change in goals of care, Clinical/OTA/ PSS/ dietary (2) case review - debrief, (3) confirm stability and highlight risks	Care conference upon return from every hospital stay to review documentation and complete assessment from outcomes of hospital stay. H&CCSS to be involved where appropriate	# of clients with care conference post hospital stay/ED transfer	100% of clients to have care conference post hospital visit	
								Televu Pilot at Binbrook	Participate in research pilot with vendor of a wearable technology for onsite care providers to connect visually in live time with specialists and physicians.	Complete pilot study	Complete pilot study	
Service Excellence	Oral Care	% of clients satisfied with oral care support	TCB/Congregate settings	Collecting Baseline Data	Collecting Baseline Data	Collecting Baseline Data	Collecting Baseline Data	Collect data re: compliance and satisfaction	(1) Add personal care question(s) to annual experience survey (2) Request feedback at annual service plan meeting (3) Create just in time survey and implement on a schedule	(1)Update made to survey for January 2024 (2)Feedback will be requested in 100% of Service Plan Meetings (3)Use just in time survey	(1) Collecting baseline (2) Collecting baseline (3) 50 % of programs will use just in time survey	
								Complete gap analysis using RAO BPG guideline on oral care	Interdisciplinary teams to review guidelines and identify gaps between BP and current practice	# of meetings held # of recommendations to review	Complete review by June 2023	
								Develop dental service partnership and resource list	(1) Explore potential partnership with dental team/service provider (2) Educate clients re: resources (3) Connecting clients with service resources	(1) # of partners/service providers (2) # of clients that received education (3) # of clients that received service	(1) Confirm partnership with at least one service provider (2) 100% of target client population will receive education resources (3) Collecting baseline	
Communication re: cancellation of bookings			Community Outreach services	2022/23 Experience Survey	75%	>85%	Below the 85% threshold for experience indicators	Reminders to clients of process for contacting the office when booking is late/missed	(1) Annual reminder at service plan meeting (2) Proactive "just in time" experience question with reminder of process to notify and followup on dissatisfaction at each wellness call	(1) % of service plan meetings (2) # of wellness calls with follow up	100% of service plan meeting and wellness calls will include ask	
								Track dashboard alerts for no-shows and late bookings	Collect and track data on late/no-show bookings	collecting baseline	collecting baseline	
								Data collection on reasons for missed or late bookings	CSAs to collect info for reasons of cancellation or late arrivals (weather, traffic/ construction, client emergency/delays, parking)	collecting baseline	collecting baseline	

Safe and Effective Care	Prevent falls and falls related injuries		TCB & Community Services	2022	32% BB 134 falls by 36 clients WHGH 25 falls by 12 clients Willett 17 falls by 8 clients	< 25%	Target set for improvement	incorporate "Comfort Care Rounds" and 4Ps (pain, position, personal needs, placement)	Comfort Care Rounds (with 4 Ps) to be incorporated into hourly rounds for congregate sites. 4P to be incorporated into all service visits	Training completed at all sites for all staff	100% of staff to be trained in 2023	
								Service/Care plan interventions for falls (TCB and Binbrook)	(1)Update care plan library with Kardex function (2)Educate nurses to use Kardex function (3)Audit care plans for medium and high risk fallers (4)Train PAs to review/reference Kardex data	% of clients screened/ assessed % of clients with falls prevention care plan	100% of clients are assessed/ screened for falls risk 100% of clients at medium to high risk have a care/service plan for falls prevention	
								Review falls BPG and complete gap analysis	(1) Hold interdisciplinary team meeting debrief following all falls that take place in the program where guidelines are reviewed and gaps are identified between BP and current practice	# of meetings held # of recommendations to review	Complete review by June 2023	
								Complete post fall analysis/root cause analysis post each fall (TCB and Binbrook)	(1)Flag falls risk status of clients for each PA (2)Provide training on fall prevention and root cause analysis for falls (3)Assign falls tracking, documentation and root cause analysis to PSW staff assigned to client tro support corrective practices	# of falls with post fall huddle/root cause analysis (5 why's)	100% of falls will have a root cause analysis completed	
Provider Experience	Turnover rates for Customer Service Assistants (CSA)	Retention rate of CSAs	CSAs	2022	46%	<30%	Target set for improvement	Develop new employee handbook resource materials for each program/site	(1) Customized handbook insert for each program (2) Provide handbook with insert to new hires	(1) Programs with handbook insert (2) New hires that receive the handbook and insert	(1) 100% of programs will have handbook insert (2) 100% of new hired will receive the handbook and insert	
								Create hybrid schedule options for CSA roles	Consulting with CSA teams and review roles to increase flexibility and satisfaction with work schedules and location	(1) CSA roles will be reviewed for flexibility and hybrid options	(1) 100% of CSA roles will be reviewed for flexibility and hybrid options	
								Providing support through training & education with a focus on worker wellness.	(1) Education needs assessment of topics and skills that would support their work (2) Implement a wellness space for CSA teams with support from Thrive's Wellness Committee	(1) Survey CSAs re: topic areas of interest (2) Engage site CSAs for ideas re: wellness supports at work	100% of CSAs will be asked for input	