Resident/Family Experience Survey 2023 Action Plan

The Action Plan below is the result of a collaborative effort involving residents, families, and our Resident and Family Council. The annual Resident and Family satisfaction survey was completed with their valuable input, and the data was meticulously analyzed to identify areas of strength and opportunities for improvement. With this collective insight, the action plan outlined below has been crafted to ensure that we continue to uphold the highest standards of care and service excellence, tailored to meet the specific needs and preferences of those we serve.

Reviewed with Resident Council: April 25, 2024 Reviewed with Family Council: May 21, 2024

| Quality Dimension | Objective | Measure/Indicator | Current Performance | Target for 2024 | Planned Improvement initiative (change Ideas) | Methods and Process Measures | Goal date for Change Idea |
|-----------------------|--|---|------------------------|---|--|---|--|
| Recreation/Activities | To continue publishing and communicating programs using various platforms and tools. To increase satisfaction with availability of weekend events. | My family members like the activities provided in this home. My family member has access to enjoyable things to do on weekends | 18% | Response in next survey no more than 5% | Improving communication between the P&S team and families about the available programs is crucial. This can be achieved by creating more opportunities for families to share their suggestions, ideas, and feedback through the Family Council. Additionally, providing staff with the proper training and tools will help ensure consistent and ongoing communication with residents and families. Effective feedback collection and utilization are also essential. Increased special programming on the weekend when feasible | This text has three main objectives. The first is to improve communication among Activation staff, residents, and the interdisciplinary team regarding resident participation and engagement opportunities. This will be done through PCC, Welbi, and verbal communication. The second objective is to increase the visibility of programs on the website through different channels, such as social media, the resident programs board, and the family council. In addition, programming calendars to be reviewed for potential increased special programming on the weekends. Finally, the third objective is to use Welbi to share residents' program participation with their POA via email through a secure PDF or physical copy. | June 30 th , 2024 and ongoing |

| Care Provision | To support resident access to health professionals | Staff support me to access other health professionals if needed (dentist, foot care, etc) | 76% | 81% | Will provide increased messaging via email/Cliniconex in the 4 weeks prior to clinics. Update to the Admission booklet to include details about available clinics. Continue to provide ongoing clinics: Dental, Vision, Advanced Footcare, Spasticity | Cliniconex messaging Admission booklet update Clinic booking |
|----------------|--|--|-----|-----|---|--|
| Communication | To improve communication with residents/families regarding their health | I receive updates about my health | 86% | 88% | Survey results to be discussed at the quarterly PAC meeting with the medical team. As part of care conference process, | PAC Meeting Care Conference |

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| ONGOING |
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| Dec 31, 2024 |
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| ONGOING |
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| Completed March 20, 202 |
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| ONGOING |
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|-----------------|---|--|---|-------------------------|---|--|---|--|
| Programs | To minimize the use of restraints | Restraint Minimization | 7.3% | Reduction of 0.5- 1% | restra month | ng review of int usage ily as part of ittee mtg. | Monthly meetings | ONGOING |
| Food and Dining | To support residents with pleasurable dining services | Overall Quality of Food and Drinks is good Mealtimes are Pleasurable for my Family Member | One area within this domain exceeded the 15% never/sometimes threshold for improvement. Respondents thought the juices were too sweet and some felt the food was too salty. One respondent thought too much | Reduction of 9% | by con Sunris compa adjust conce Febru • Additi clarifie that ju lunch offere | otly addressed stacting the e Juice any, who ed the juice ntration on ary 22 nd . onally, we | Food Committee Meetings Education for PSWs to be conducted in monthly PSW meetings by Director of Care and Dietary Manager | February 28 th , 2024 May 31, 2024 |

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|--|---|---------------------|---|------------------------|--------------------------------------|
| | | food was wasted. | | have a choice. | |
| | | The overall quality | • | Furthermore, | Food Committee Meetings |
| | | of food and drinks | (| ongoing education | |
| | | is good. (24% | 1 | for PSW's will | |
| | | never/sometimes | (| emphasize the | |
| | | the same as 2022). | i | importance of | |
| | | | (| offering juice at | |
| | | Another issue | I | meals rather than | |
| | | highlighted was the | I | placing it on the | |
| | | excessive salt | 1 | table before | |
| | | content in some | 1 | residents arrive. | |
| | | meat dishes. | • | We also brought up | |
| | | | | the salt in the meat | |
| | | | , | with this issue with | |
| | | | I | member, however it | |
| | | | , | was not a significant | |
| | | | (| concern for the Food | |
| | | | (| Committee | |
| | | | I | members. | |
| | | | • | We raised this issue | |
| | | | | in the cooks' | |
| | | | | meeting to ensure | |
| | | | | their awareness of it. | |
| | | | | Send out a mini | |
| | | | | survey in mid July | To be sent to all families via email |
| | | | | with a couple key | |
| | | | | questions to gage | |
| | | | | improvement | |
| | | | | mprovement | |
| | | | • | Re-education to all | Inservices and education huddles |
| | | | | staff regarding | |
| | | | | "Pleasurable Dining" | |
| | | | | | |
| | | | | | |

| Ongoing |
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| |
| July 31, 2024 |
| June 30, 2024 |
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