



RK MACDONALD NURSING HOME

BOARD DASHBOARD

RK MacDonald Nursing Home - Board Quality Report: Resident Health Clinical Indicators

Indicator	Definition	2022 - 2023				2023-2024				Benchmark or target
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
# of Protection for Persons in Care reports	# of reported incidents to Protection of Persons in Care.	2	0	0	0	1	1	0		0
# of Founded PPCA reports	Measure the # of incidents that meet the criteria (DHW) over a determined period (quarterly).	2	0	0	0	pending	0	0		0
# of Critical Incidents reported to DHW-founded	Measure the # of incidents that meet the critical incident criteria (DHW) over a determined period of time	2	0	1	0	0	0	0		0
Pressure Injury Prevalence	% of residents who have a pressure ulcer in the facility on the day of the report. Numerator = # of people with wounds stage 2 or greater x1000 Denominator the total census on that day multiplied by 100 to get a facility percentage Example: 10 residents with stage 2 wounds or greater / 136 residents in the facility on the day of the report=7.63% wound prevalence rate	4.34%	6.75%	5.26%	7.25%	7.74%	4.70%	3.01%		CIHI: wounds were reported in 10% of LTC and 30% of hospital-based Continuing Care clients. (2013).

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Pressure Injury Incidence	% of residents who developed a pressure ulcer after admission to the Home. Numerator = number of residents who develop a new ulcer after admission Denominator = number of residents at the time of the report (same # as prevalence)	0.80%	1.04%	1.32%	0.75%	0.75%	0.75%	0.25%		Trend. Lower number is better.
Fall Rate/1000 days	# falls per quarter/resident occupancy rate per Quarter. Numerator = Total Number of Falls Denominator = Total Number of Resident Days on the care area x 1000	6.35	5.45	4.56	6.30	7.56	10.23	8.57		CIHI: None Health Quality Ontario (external): 9% for long-term care
Infection Rate/1000 days	The # of infections in facility over the quarter Including respiratory, skin, urinary infection and sepsis. Numerator = # of infections in the Home Denominator = Total # of Resident Days on the care area x 1000	3.06	2.52	2.10	3.07	1.65	3.97	4.67		Trending only: Lower number is better.
Handwashing Rates	4 Moments of Hand Hygiene Percent Appropriate Hand Hygiene Practice by Health Care Workers (HCW)	93%	93%	97%	96%	93%	86%	91%		Canadian Patient Safety Institute 80%
Medication Errors	Medication errors are preventable events related to the incorrect administration of medications	3	6	1	4	7	2	4		18 meds/res X 136 res x 90 days = ~ 220,320 meds dispensed / quarter
Medication Reconciliation	BPMH is collected and reconciled 1. within 24 hours of admission	100%	100%	100%	100%	100%	89%	98%		100% Accreditation Standard

RK MACDONALD NURSING HOME – BOARD QUALITY REPORT: Resident Life Experiences

		2023-24				2023-24					
Indicator	Definition	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Benchmark or Target	
Experienced Based Resident First Voice Program Evaluation	1 st Voice Program Evaluation – Indicators E - Enjoyment FC - Feeling Connected M - Meaningfulness	New						E – 100%	FC – 100%	M - 93%	80%
Spiritual Services	# of Spiritual Programs & Services	New						44		24	
Musical / Programming	# of Music Programs	New						92		48	
Volunteer Hours	# of Volunteer Hours	New						524		450	

RK MACDONALD NURSING HOME – BOARD QUALITY REPORT: Internal Operational Health Efficiency Indicators

		2022 - 2023				2022-2023				
Indicator	Definition	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Benchmark or Target
License Review	# of recommendations from bi-annual Licensing Inspection - LTC Program Requirements	0	7	0	0	Nil	1	0		OHS Compliance = plan in place
HSK Room Audit	Resident rooms are audited once vacated by the previous resident	New						100 %		
Resident Data	# of resident deaths	13	15	9	13	16	10	10		Trending only
	# of residents discharged	0	0	3	0	1	1	1		
	# of residents admitted	10	26	17	13	17	9	11		

RK MACDONALD NURSING HOME – BOARD QUALITY REPORT: Staff Health / Learning and Growth Indicators

Indicator	Definition	2022 - 2023				2023 - 2024				Benchmark Or Target
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
Total # of WCB claims	# Claims per Quarter yr. & (quarter in bracket)	5	12	18 (6)	4	11 (7)	20 (9)	26 (6)		0
Lost Time	Total # of Time Lost Claims yr. & (quarter in bracket)	6 (2)	8 (0)	10 (2)	2	8 (6) as of Aug 29/23	10 (2) as of Oct 24/23	16 (6) Dec 31/23		0
Total # of Grievances NSNU	# Of grievances per current quarter	0 (0)	0	0 (0)	0	0	0	0		0
Total # of grievances Unifor	# Of grievances per current quarter (# in current quarter in brackets)	4(2)	1	4 (0) Oct – Dec 22	0	0	0	0		0
% Of Sick Hours	Numerator: Calculated Sick Hours 1) % Percentage based on Total of all hrs. paid and sick 2) % Denominator: Total hours sick/worked X 100	8997.34 (10.90%) 12.15%	8.5%	7924.25 (9.69%) 9.37%	7973.72 (8.69%) 10.71%	7903.48 (9.92%) 9.27%	11,256.38 (11.73%) 12.78%	12,265.83 (13.02%) 14.69%		Organization Target is 7% - target was implemented pre COVID **Q2 /23– Covid outbreak in Tangle & Maple may affect ↑Sick as well Surgery L & Isolation Periods
Voluntary turnover of Active Staff Non-Mgmt.	# Of staff resignations or retirements (# in current quarter in bracket)	31 (19)	51 (20)	79 (28)	(6)	25 (19)	46 (21)	53 (7)		High # reflects students going back to school
Involuntary turnover of Active Staff Non-Mgmt.	# Of staff whose employment was terminated involuntarily.	1 (1)	0	1 (0)	(1)	2 (1)	3 (1)	5 (2)		No Terminations
Joint Occupational Health and Safety	# Of meetings hosted in this Quarter	1	3	3	3	3	2	2		Hired OHS Safety Consultant

RK MACDONALD NURSING HOME – BOARD QUALITY REPORT: Annual and Bi-annual Performance Indicators

Indicator	Definition	2022 - 2023				2023 – 2024				Benchmark / Target
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
Fire Marshal Inspection	Annual Fire Marshal Inspection occurs in February. Recommendations are followed up as required with a subsequent repeat inspection as necessary	Complete	Nil	Nil	1 7 follow ups complete	N/A	N/A	N/A		Last inspected in March
Resident & Family Satisfaction Survey	Annually Surveys tabulated and shared with RK Community	Nov.	Nov.	Survey complete & action plans pending	Nov.	Nov.	Nov.	Pending Review		>75% Agree >25% disagree goes to the QIP
Department of Agriculture Inspection	Annual Inspection	Complete	Nil	Nil	In Place	N/A	N/A	Complete		Complete – no actions pending
WCB status Merit/Demerit	Basic Industry Rate set by WCB. Below Industry rate = merit status	Demerit	Demerit	\$6.17 ↓ to \$5.68 / \$100 payroll	Merit	Merit	Merit	Current Merit \$ 5.68 5.36↓ for 2024		Industry 6.13/ \$100 Base Industry Rate for 2024 \$6.10/\$100 Payroll ER Merit -.74 5.36/\$100 payroll

File: Accreditation (X) Drive: Quality Indicators ad Dashboard / Board Dashboard / 2023 / Master Score Card Q3 October - December 2023