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RK MACDONALD NURSING HOME

Board Quality Report: 2025-2026: Q1 √ Q2 √

<u>Timelines</u>: Data Collection complete and reviewed at Quality Meeting hosted on the 2nd Thursday of April, July, October, and January at 2:30pm – Roost – Agenda: 1) Celebrate our successes, 2) update the Quality Improvement Plan

<u>Clinical and Operational Quality Indicators</u>										
		2025-2026				2026-2027				
Indicator	**Definition**	**Q1**	**Q2**	**Q3**	**Q4**	**Q1**	**Q2**	**Q3**	**Q4**	**Benchmark or target**
# of PPCA Reports	# reported / # founded per quarter	0/1	0/0	1/1	1/1	3/ongoing	0/2 ongoing			**0**
# of Critical Incidents	# reported / # founded per quarter	4/0	3/0	5/0	3/0	7/0	4/0			**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	5.42%	3.68%	2.97%	3.94%	4.44%	3.70%			Benchmark: < 10%
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)	0.49%	0.74%	0.00%	0.49%	0.49%	1.48%			**Trend**. Lower number is better.
Fall Rate / 1000 days	Numerator = Total # of Falls Denominator = Total # of Resident Days x 1000	6.10	6.04	6.59	5.98	4.82	9.1			

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	3.50	3.54	2.96	3.16	2.28	2.09			Trending only: Lower number is better.
Handwashing Rates	**4 Moments of Hand Hygiene** % Appropriate Hand Hygiene Practice by Health Care Workers	84%	83%	82%	80%	84%	80%			Canadian Patient Safety Institute 80%
Medication Errors	Medication errors are preventable events related to the incorrect administration of medications (# with NO harm / # with harm)).	6/0	2/0	4/0	3/0	6/0	4/0			0 ~ 220,320 dispensed / quarter
Admission Assessments	% Completion of required assessment within allotted time frame	100%	100%	100%	100%	100%	100%			100% (LTC PR)
Experienced Based Resident First Voice Program Evaluation	1st Voice Program Evaluation – Indicators % = E – Enjoyment + FC - Feeling Connected + M - Meaningfulness	99%	99%	99%	99%	100%	100%			80%
Spiritual Services	# of Spiritual Programs & Services	58	50	49	66	60	27			24
Musical / Programming	# of Music Programs	204	183	171	177	160	130			48
Volunteer Hours	# of Volunteer Hours	962	466	1049	1195	1255	600			450
Licensing Review	# of recommendations from bi-annual Licensing Inspection	3	0	0	5	1	0			Inspection in June/2026
HSK Room Audit	Resident rooms audited once vacated by the previous resident	n/a	100%	100%	100%	100%	100%			100%
Resident Data	# of resident deaths	9	11	8	7	13	5			Information only
	# of residents discharged	1	3	1	0	0	1			
	# of residents admitted	12	15	9	6	13	7			
# Of WCB Physical injury claims	# Claims per Quarter	6	4	6	5	1	6			Target = 0
# Of WCB Psychological claims (GOS Gradual Onset Stress)	# Claims per Quarter			New	0	0	1			First RK Claim
WCB status Merit/Demerit	Basic Industry Rate set by WCB. Below Industry rate = merit status	.04↓	.04↓	.04↓	Merit	Merit	Merit			2026 Industry rate 5.84 -.23 = 5.61 ↓ based on costs for yrs. 22-24 Merit for 2026
Lost Time	Total # of Time Lost Claims for Quarter	0	2	3	1	1	3			Cost/ Claims down ↓by $11,871.82 for 2025 from 2024; 2024 Cost/Claims ↓ down from 2023 by $34,000.00
Total # of Grievances NSNU &Unifor	NSNU: # grievances per quarter Unifor: # grievances per quarter	0 3	0 0	0 4	0 3	0 1	0 0			No Cost or Mediation, or Arbitrations (All Grievances Resolved for 2025) (Q2) July - Sept 2026 – 0
% Sick Hours	Sick Hours: Paid + Unpaid sick hours X 100 Standard # of hours	7.05%	6.71%	8.36%	9.16%	10.10%	11%			Q2 # of EE sick leaves in this quarter followed by 2 Employee Deaths – as well as vacation period

		2025-2026				2026- 2027				Notes
		Q1	**Q2**	**Q3**	**Q4**	**Q1**	**Q2**	**Q3**	**Q4**	**Q 2 = 18 staff departures** - 2 Deceased - 2 Medical reasons - 2 Not right time family reasons - 1 Not right place for them - 1 Contracted ended - 1 Retired - 1 Relocate - 2 Grad RN/LPN - 1 Back to School -3 Not available for shifts inactive -1 Resigned -1 Accepted FT elsewhere
Vol. turnover of Active Staff	# of staff resignations or retirements / quarter	17	34	19	28	28	18			
Invol. turnover of Active Staff	# of staff terminated involuntarily / quarter	0	2	1	2	1	0			
Employee Retention Rate (New process to Q3)	# of employees at end of the quarter - minus new hires Divided by # of employees at start of the quarter Multiply by 100 = retention rate (higher % is better)	94.6%	88.6%	96.9%	90.4%	90.5%	93.9%			Retention Target: >70% • **Start of Q: 297 staff** • **Ended of Q2: 307** • **28 new hires 18 End (Term)**
Employee Turnover Rate (New process to Q3)	Average # of employees at the start of the quarter + # of employees at the end of the quarter divided by 2 = average divide the # of employees who left the organization by the average # of employees Convert to % (x rate by 100) (lower % is better)	New		6.27%	9.6%	9.6%	5.96%			Turnover Rate Target: <20%

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