



# RK MACDONALD NURSING HOME

## Board Quality Report

RK Macdonald Nursing Home - Resident Health Clinical Indicators										
Indicator	Definition	2023 - 2024				2024-2025				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.	1	1	0	1	2				0
# of Founded PPCA reports	Measure the # of incidents that meet the criteria (DHW) over a determined period (quarterly).	pending	0	0	1	1				0
# of Critical Incidents	Measure the # of incidents that meet the critical incident criteria (DHW) over a determined period of time	0	0	0	0	1 (Meds)				0
Pressure Injury Prevalence	<p>% of residents who have a pressure ulcer in the facility on the day of the report.</p> <p><b>Numerator</b>= # of people with wounds stage 2 or greater x1000</p> <p><b>Denominator</b> the total census on that day multiplied by 100 to get a facility percentage</p> <p><b>Example:</b> 10 residents with stage 2 wounds or greater / 136 residents in the facility on the day of the report=7.63% wound prevalence rate</p>	7.74%	4.70%	3.01%	4.45%	2.72%				<p><b>CIHI:</b> wounds were reported in <b>10% of LTC</b> and 30% of hospital-based Continuing Care clients. (2013).</p>

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		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
<b>Pressure Injury Incidence</b>	% of residents who developed a pressure ulcer after admission to the Home. <b>Numerator</b> = number of residents who develop a new ulcer after admission <b>Denominator</b> = number of residents at the time of the report (same # as prevalence)	0.75%	0.75%	0.25%	0.25%	0.25%				<b>Trend.</b> Lower number is better.
<b>Fall Rate/1000 days</b>	# Falls per quarter/resident occupancy rate per Quarter. <b>Numerator</b> = Total Number of Falls <b>Denominator</b> = Total Number of Resident Days on the care area x 1000	7.56	10.23	8.57	25.4	24.9				<b>CIHI:</b> None
<b>Infection Rate/1000 days</b>	The # of infections in facility over the quarter Including respiratory, skin, urinary infection and sepsis. <b>Numerator</b> = # of infections in the Home <b>Denominator</b> = Total # of Resident Days on the care area x 1000	1.65	3.97	4.67	4.34	4.74				Trending only: Lower number is better.
<b>Handwashing Rates</b>	<b>4 Moments of Hand Hygiene</b> Percent Appropriate Hand Hygiene Practice by Health Care Workers (HCW)	93%	86%	91%	88%	86%				Canadian Patient Safety Institute 80%
<b>Medication Errors</b>	Medication errors are preventable events related to the incorrect administration of medications (# with harm).	7	2	4	4	11 (no harm)				0 ~ 220,320 meds dispensed / quarter
<b>Admission assessments</b>	% Completion of all required admission assessments within allotted time frame.					90%				100% LTCPR

**RK MACDONALD NURSING HOME – Resident Life Experiences**

		2023- 2024				2024- 2025				
Indicator	Definition	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Benchmark or Target
<b>Experienced Based Resident First Voice Program Evaluation</b>	1 <sup>st</sup> Voice Program Evaluation – Indicators E - Enjoyment FC - Feeling Connected M - Meaningfulness	New		E – 100% FC – 100% M - 93%	E- 100% FC- 100% M- 100%	E- 98% FC- 100% M- 100%				80%
<b>Spiritual Services</b>	# of Spiritual Programs & Services	New		44	63	55				24
<b>Musical / Programming</b>	# of Music Programs	New		92	137	183				48
<b>Volunteer Hours</b>	# of Volunteer Hours	New		524	931.70	661				450

**RK MACDONALD NURSING HOME – Internal Operational Health Efficiency Indicators**

Indicator	Definition	2023- 2024				2024- 2025				Benchmark or Target
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
<b>License Review</b>	# of recommendations from bi-annual Licensing Inspection - LTC Program Requirements	Nil	1	0	12	0				OHS Compliance = plan in place
<b>HSK Room Audit</b>	Resident rooms are audited once vacated by the previous resident	New		100 %	100%	16/16 – 100%				
<b>Resident Data</b>	# of resident deaths	16	10	10	14	4				
	# of residents discharged	1	1	1	0	2				
	# of residents admitted	17	9	11	16	5				

**RK MACDONALD NURSING HOME – Staff Health / Learning and Growth Indicators**

Indicator	Definition	2023- 2024				2024-2025				Benchmark Or Target
		Q1 Apr-Jun	Q2 Jul-Sept	Q3 Oct-Dec	Q4 Jan- Mar	Q1 Apr - Jun	Q2 Jul-Sept	Q3 Oct-Dec	Q4 Jan-Mar 25	
<b>Total # of WCB claims</b>	# Claims per Quarter yr. & (quarter in bracket)	11 (7)	20 (9)	26 (6)	0 (3)	7 (4)				0
<b>Lost Time</b>	Total # of Time Lost Claims yr. & (quarter in bracket)	8 (6) as of Aug 29/23	10 (2) as of Oct 24/23	16 (6) Dec 31/23	0 (0)	6 (6)				0
<b>Total # of Grievances NSNU</b>	# Of grievances per current quarter	0	0	0	0	0				0
<b>Total # of grievances Unifor</b>	# Of grievances per current quarter (# in current quarter in brackets)	0	0	0	2	4 (2)				0 Comments: All have been resolved.
<b>% Of Sick Hours</b>	Numerator: Calculated Sick Hours 1) % Percentage based on Total of all hrs. paid and sick 2) % Denominator: Total hours sick/worked X 100	7903.48 (9.92%)	11,256.38 (11.73%)	12,265.83 (13.02%)	9649.82 (11.62%)	9424.95 (10.80%)				Organization Trigger 10% from 7% Isolation Periods under IPAC has ↑ sick Stats thus target is now 9%
<b>Voluntary turnover of Active Staff</b>	# Of staff resignations or retirements (# in current quarter in bracket)	25 (19)	46 (21)	53 (7)	65 (12)	33 (21) (1 Mgt)				5-10 or No Turnover Current Q1 reasons: 13 Grad RN/Moved 2 Retired 1 Deceased 5 took another job

<b>Involuntary turnover of Active Staff</b>	# Of staff whose employment was terminated involuntarily.	2 (1)	3 (1)	5 (2)	2	3 (1)				No Terminations
<b>Joint Occupational Health and Safety</b>	# Of meetings hosted in this Quarter	3	2	2	4	3				

<b>RK MACDONALD NURSING HOME – Annual and Bi-annual Performance Indicators</b>										
		2023 - 2024				2024 – 2025				
Indicator	Definition	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Benchmark / Target
<b>Fire Marshal Inspection</b>	Annual Fire Marshal Inspection occurs in February. Recommendations are followed up as required with a subsequent repeat inspection as necessary	N/A	N/A	N/A	N/A	N/A				Last inspected in March
<b>Resident &amp; Family Satisfaction Survey</b>	Annually Surveys tabulated and shared with RK Community	Nov.	Nov.	Pending Review	Complete	Nov.				>75% Agree >25% Disagree goes to the QIP
<b>Department of Agriculture Inspection</b>	Annual Inspection	N/A	N/A	Complete	Complete	Complete				Complete – no actions pending
<b>WCB status Merit/Demerit</b>	Basic Industry Rate set by WCB. Below Industry rate = merit status	Merit	Merit	Current Merit \$ 5.68 5.36↓ for 2024	Merit	Merit				Merit/ or Low Cost Industry 6.13/ \$100 Base Industry Rate for 2024 \$6.10/\$100 Payroll ER Merit -.74 5.36/\$100 payroll

File: Accreditation (X) Drive: 2024 Survey / Board Dashboard / Master Score Card April 2024-25