



compassion respect empathy acceptance teamwork empowerment

**CONTINUOUS QUALITY IMPROVEMENT (CQI) ANNUAL PLAN April 2024 to March 2025**

Goal Area	Goal statement	Steps to Achieve	Most responsible Person (each step)	Completion Aim date (each step)
Safe Care & Services: Emergency Response	Braemar will complete 100% of emergency code drills as per code calendar.	Track progress on CQI Report for Measurement <ul style="list-style-type: none"> <li>• April – Purple</li> <li>• May –Brown</li> <li>• June – Tornado</li> <li>• July – Flooding</li> <li>• August – White</li> <li>• September –Green (mock evac)</li> <li>• October – Blue</li> <li>• November –Explosion</li> <li>• December- yellow</li> <li>• January - White</li> <li>• February - Black</li> <li>• March – Grey</li> </ul> Drills to be completed monthly for all shifts	PCC	Monthly
Safe Care & Services: Emergency Response	Braemar will complete 100% of fire drills, including an annual mock evacuation.	Track monthly progress on CQI Report for Measurement	ESM	Monthly
Staff Culture & Experience: Unhealthy Risk Culture	Braemar will implement an interdisciplinary Diversity, Inclusiveness and Culture Committee	Meet Quarterly and as needed  Clear Concise communication of the Mission, Vision and Values  Annual Staff recognition & Awards Program  Annual Diversity and Inclusiveness education	Committee  Committee  DOR, Committee  PCC, Committee	Monthly  Ongoing  Sept 2024  Sept 2024



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Staff Culture & Experiences: Performance Appraisals	Braemar Leadership will ensure Performance Appraisals (PA) are completed for all staff	Compile list of all staff requiring appraisals	PCC	Feb 28, 2024
		Separate staff list into departments and spread scheduled appraisals over calendar year for larger departments	PPC	March 15, 2024
		Choose appraisal method	Leadership team	March 15, 2024 Throughout year as per calendar
		Ensure use of universal appraisal tool	Department Leads	
Resident Experience: Resident & family Satisfaction	Braemar will maintain Resident and Family experience to above 90% satisfaction	Review 2023 survey results and seek identified areas of improvement	Committee	March 1 2024
		Provide Survey at time of care conference	Dir. Of Rec	Apr 2024
Resident Experience: Resident & family Satisfaction	Braemar will maintain percentage of residents who responded positively to the statement: "I can express my opinion without fear of consequences".	Director of Recreation, Director of Care and a member of the regular Nursing Staff will review all residents profiles with a CPS of 3 to look for opportunities for residents to respond. Utilize Care Conferences as an opportunity to complete Resident Satisfaction Surveys	DOC/PCC/DOR	Annual/ ongoing
Resident Experience: Resident & family Satisfaction	Braemar will increase percentage of residents responding positively to: "What number would you use to rate how well the staff listen to you?".	Adjust Survey to include the specific question	PCC/DOR	
Staff Culture & Experiences	Braemar will maintain completion of mandatory education for ALL	All annual mandatory required education in surge assigned to each position	PCC	Feb 2024

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Mandatory Education	employees at 100% (including SURGE and required in-person learning)	<p>Orientation Education – follow the orientation template for assigning staff in the correct education groups</p> <p>Departments Heads to review status reports monthly at their monthly departmental meetings and follow up with individual staff a needed</p> <p>Education payouts to all with completion – staff that are out of compliance to have documented follow up in file</p> <p>Mandatory live education planned annually; attendance to be taken</p>	<p>PCC</p> <p>Department Leads</p> <p>PCC/Payroll</p> <p>PCC</p>	<p>Ongoing</p> <p>As education due dates approach</p> <p>As per due dates payout dates</p> <p>September 2024</p>
Safe Care & Services: Incidents resulting in jury (CIS)	Braemar will reduce CIS submissions d/t Incident resulting in resident injury for which resident is sent to hospital by 10% by December 31, 2023.	<p>Review any new CIS at leadership meetings</p> <p>Investigate each case and document Ensure adequate follow up</p> <p>Review processes for avoidance in building capacity for point of care staff in:</p> <ul style="list-style-type: none"> <li>• Falls prevention</li> <li>• Pain / palliation</li> <li>• Responsive behaviours</li> <li>• Dehydration prevention</li> <li>• Constipation prevention</li> </ul>	<p>DOC</p> <p>DOC</p> <p>DOC</p>	<p>As incurred</p> <p>As incurred</p> <p>As incurred</p>
Safe Care & Services: Restraints	Braemar will maintain restraints to below provincial average (3%) throughout 2023.	<p>Monthly committee- for overall review</p> <p>-resident based case review to be on each unit</p> <p>-Annual program evaluation with corrective actions / improvement goals implemented</p>	<p>QI RN/ DOC</p>	<p>ongoing</p>

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Safe Care & Services: Falls	Braemar will reduce the percentage of ltc home residents who fall within 30 days leading up to their assessment	Assess falls data and analyze same in an effort to reduce falls	DOC/QI RN	Ongoing
		Post fall huddles will be held after all falls	QI RN/ RN	ongoing
Safe Care & Services: Antipsychotic medication	Braemar will reduce the percentage of ltc residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment	Data related to the use of anti-psychotic usage in the home will be reviewed at least quarterly to seek to identify patterns and trends	DOC/BOS Leads	Quarterly/ongoing
		Maintain a list of residents who have orders for anti-psychotic medications who do not have a diagnoses that meets CIHI criteria	BSO Leads	Ongoing
Safe Care & Services / Resident Experience:  Delivered Food Temperatures	Braemar will ensure Hot Food is being served at 60 degrees Celsius or above	Meal temp audits conducted by dietary staff	NSM/COOKS	ongoing
		Monthly audit review by dietary manager	NSM	
		Annual program evaluation	NSM/VIDA	
		Monthly /departmental meetings	NSM	
Resident Experience:	Braemar will improve the snack experience for resident through use of snack menu & use of service tools	Snack Audit – min twice per month	NSM/Dietitian	ongoing
		Snack Labels-updated on weekly basis or as per need		
		Snack return tracking tool- returned snack monitored on daily basis		
Safe Care and services / Resident Experience: Cleanliness	Braemar will ensure resident rooms and common spaces are maintained in a clean and safe manner and in good repair.	Review Resident/ Family Satisfaction Survey results regarding cleanliness and implement any corrective actions.	PCC/DOR	Annual
			ESM/PCC	Ongoing

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		<p>Ensure regular monthly auditing of common spaces to identify areas in need of maintenance/repair.</p> <p>Ensure regular monthly audits of resident rooms to ensure they are maintained in a clean, uncluttered manner and any repair/maintenance needs are identified.</p> <p>Maintain record of all audits</p> <p>Promptly address any items brought forward for maintenance (WorxHUB) and maintain records of same.</p>	<p>ESM/PCC</p> <p>ESM</p> <p>ESM/Maintenance Help</p>	<p>Ongoing</p> <p>Ongoing</p> <p>As incurred</p>
Staff Satisfaction	Braemar will increase to 90% satisfaction for <i>all departments work as a team</i>	<p>Opportunities for improved communication flow between depts.</p> <p>Facilitate regular weekly huddles</p>	Leadership	ongoing
Staff Satisfaction	Braemar will increase to 75% for <i>I have a manageable amount of work- related stress</i>	Work towards ensuring staffing is full on the floor to help alleviate stress.	Leadership	ongoing
Resident Satisfaction Survey	Braemar will increase to 3.00 for <i>I know the names of the people who care for me</i>	Ask resident feedback on how to improve during resident's council	PPC/DOR	April
Resident Satisfaction Survey	Braemar will increase resident response to 25% in 2024	Provide opportunity to complete survey during resident care conference	DOR	ongoing



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**ACCREDITATION ACTION PLAN April 2024 to March 2025**

Goal Area	Goal statement	Steps to Achieve	Most responsible Person (each step)	Completion Aim date (each step)
Delivery of Care Models/ Emergency and Disaster Management	Braemar will obtain and document the resident's informed consent before providing virtual health services.	Create Virtual Care Policy	PPC/DOC	April 2024
		Create Virtual care Consent Form	PPC/DOC	April 2024
		Add Consent form to resident admission package	PPC	August 2024
Delivery of Care Models	Braemar will ensure all roles have an up-to-date role description	Position Profiles with defined roles, responsibilities, and scope of employment/ practice for all positions	PPC/ Dept. Lead	April 2024
		Annual Review	PPC/ Dept. Lead	Annual
Governance and Leadership	Braemar's governing body approves the organization's capital and operating budgets on a regular basis	Meet annually to set up and approve capital/ organizational budget	Admin	Annual
		Meet monthly with Dept. Lead to review budget	Admin	Monthly/ongoing
Governance and Leadership	In partnership with the executive leader of the organization, the governing body will set performance objectives for the executive leader and reviews them annually.	Create tracking systems through tools such as checklists, auditing and tracking spreadsheets.	Administrator/ PPC	March 2025
		Review and Report with governing body	Administrator	Annual/ongoing
Governance and Leadership	Braemar will develop and implement Policies and processes for selecting and negotiating	Develop and implement policy for selecting and negotiating contracted services.	Administrator	August 2024



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	contracted services are developed and implemented.			
Infection Prevention and Control	Braemar will develop and implement a risk assessment to identify activities that have a high risk for spreading infections.	Create a risk assessment to identify activities that have a high risk for spreading infections.  Ensure the activities are addressed in infection prevention and control policies and procedures.	IPAC Lead  IPAC Lead	March 2025  Ongoing
Medication Management	Braemar will develop and implement a procedure for the handling of medications brought in by residents, families and/or caregivers.	Develop and implement a procedure for handling of medications brought in by residents, families and/or caregivers	DOC	March 2025
Medication Management	Braemar will identify and implemented a list of abbreviations, symbols, and dose designations that are not to be used in the organization.	Audit compliance for "Do not use" List.	Quality RN	Monthly/ongoing
Residents' Care Experience	Braemar will Educate and train team members on how to work respectfully and effectively with residents, families and/or caregivers with diverse cultural backgrounds, religious beliefs, and care needs.	Increase education for staff on Diversity and Inclusion	PPC/ DOR	September 2024
Residents' Care Experience	Braemar will facilitate access to translation and interpretation services.	Create a resource toolbox to access translation and interpretation resources for residents.	DOR	March 2025

**SATISFACTION SURVEY ACTION PLAN April 2024 to March 2025**

Goal Area	Goal statement	Steps to Achieve	Most responsible Person (each step)	Completion Aim date (each step)
Saff Experience: Staff Satisfaction	Braemar will increase staff response to 50% for 2024/2025	Track number of staff who complete survey to report to staff	PPC	Dec 2024
		Put survey out Aug/Sept instead of at the end of the year.	PPC	Sept 2024
Saff Experience: Staff Satisfaction	Braemar will decrease to 20% for staff who responded they feel some staff are given preferential treatment	Ask staff to clarify what area's they feel preferential treatment are given.	Dept. leads	February 2024
		Ensure processes are being followed across the board as per organizational policy.	Dept. Leads	Ongoing
		Be more present on the floor and engage/acknowledge all staff	Dept. Leads	ongoing
Saff Experience: Staff Satisfaction	Braemar will increase to 90% satisfaction for <i>my department provides all the equipment, supplies, and resources necessary for me to do my duties</i>	Ask staff if there is any equipment, supplies, or resources they need and don't have access too.	Dept. leads	Feb 2024
		Review/ Revise job roles/routines	Dept. leads	June 2024
		Monthly staff meetings to ensure opportunity for staff to address what they need	Dept. leads	monthly