

2025/26 Quality Improvement Plan for Ontario Long Term Care Homes  
 "Improvement Targets and Initiatives"



Manoir Marchel 949 MONTREAL ROAD, Ottawa, ON K3R5S6

Area	Measure	Unit / Population	Source / Period	Organization ID	Current performance	Target	Target justification	External Collaborators	Planned Improvement (Change Ideas)	Methods	Process measures	Target for process measure	Comments	
M - Mandatory (all cells must be completed) P - Priority (complete ONLY the comments cell if you are not working on this indicator) O - Optional (do not select if you are not working on this indicator) C - Custom (add any other indicators you are working on)														
Access and Flow	Efficient	Rate of ED visits for modified level of ambulatory care-residence conditions* per 100 long-term care residents.	0	Rate per 100 residents / LTC home residents	CWH CCRC, CWH NACRC (Post 1, 2023, to Sep 30, 2024) 032 to the end of the following Q2)	54378*	20	18.00	The home has already been improving over the past year. We have a process that has certainly helped us achieve our goal gradually and plan to mirror in 25-26.	NHS, BSO, PCL, RHAD BP Consultant, MD Pharmacists, LTC, *	1) Use of SBAR, food cases analysis of transfers. Registered in charge nurse by communication by physician and NP.	Education and re-education will be provided to registered staff on the continued use of SBAR tool and support standardized communication between	Number of communication process used in the SBAR format, between clinician per month.	80% of communication between physicians and registered staff
Equity	Equitable	Percentage of staff (executive level, management or all) who have completed relevant equity, diversity, inclusion, and anti-racism education	0	% / Staff	Local data collection / Most recent consecutive 12-month period	54378*	100	100.00	Our target is expected to be 100% in this a part of our mandatory education process.	Cultural based organizations in the community	1) To improve overall dialogue of diversity including equity and anti-racism in the workplace;	Training and/or education through surge education live events;	Number of staff education on Culture and Diversity	100% of staff educated on topics of Culture and Diversity
Experiences	Patient-centred	Percentage of residents responding positively to "What number would you use to rate how well the staff listen to you?"	0	% / LTC home residents	In house data, HECAP's survey / Most recent consecutive 12-month period	54378*	85.96	88.00	The home is fully committed to improving this indicator. A robust plan is in place to ensure improvement in this area.	RHAD BPG	1) Educate staff on Person and Family-Centred Care	The home will roll out education for all staff on the principles Person- and Family-Centred Care	The number of staff educated on Person- and Family-Centred Care in the year	80% of staff will be educated on Person- and Family-Centred Care in the year
Safety	Safe	Percentage of LTC home residents who fall in the 30 days leading up to their assessment	0	% / LTC home residents	CWH CCRC / July 2024 to Sep 30, 2024	54378*	14.64	12.00	The home has experienced an improvement over the past year. In particular with the fall's clinical the rollout. The home is confident, this value will continue to assist the home meet corporate target.	OMAH, Royal, PRC	1) Monthly collaboration with Falls committee, and external resources for the development of the resident's plan of care.	Case-by-case review of residents who have fallen in the monthly during the monthly quality meeting. review of plan of care.	The number of residents reviewed in a month who have experienced a fall and are determined to be medium and high risk for falls.	100% of resident who have experienced a fall and are determined to be
Safety	Safe	Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment	0	% / LTC home residents	CWH CCRC / July 2024 to Sep 30, 2024	54378*	25.20	17.50	The home has a process in place to address this indicator, looking into consideration all aspects, pharmacological and non-pharmacological interventions.	OMAH, Royal, PRC	1) The MD, NP, BSO internal and external (including Psychogeriatrics Team), with nursing staff will meet monthly to review newly	Monthly interdisciplinary meetings to be held with a focus on responsive behaviors and antipsychotic medication.	Number of meetings held monthly by the interdisciplinary team. The number of antipsychotic medication prescribed in the month. The number of PRC meetings were held quarterly, where discussions and review on updates have resulted in a decrease of	100% of Residents who are prescribed antipsychotic medications will have their care plans reviewed
Safety	Safe	Percentage of LTC residents who develop worsening pressure injury stage 1-4	0	% / LTC home residents	Local data collection / Most recent consecutive 12-month period / PCC brought - CWH - 4 Qtr Average-3.39%	54378*	3.99	2.50	The home has a process in place to address this indicator, looking into consideration all aspects, pharmacological and non-pharmacological interventions.	NHWOC, NP, MD, Mediboo consultants	1) Provide education and re-education on pressure ulcer assessment and management. Education to be assessed by NHWOC.	Director of Care to arrange education for Registered staff and PSW, with NHWOC, Mediboo consultant.	Number of Registered staff and PSW educated in the year.	100% of Registered staff and 90% of PSWs to be educated by March 31/26
Safety	Safe	Percentage of LTC residents who are prescribed antipsychotic medication, to include review	0	% / LTC home residents	Local data collection / Most recent consecutive 12-month period / PCC brought - CWH - 4 Qtr Average-3.39%	54378*	3.99	2.50	The home has a process in place to address this indicator, looking into consideration all aspects, pharmacological and non-pharmacological interventions.	NHWOC, NP, MD, Mediboo consultants	1) Provide education and re-education on pressure ulcer assessment and management. Education to be assessed by NHWOC.	Director of Care to arrange education for Registered staff and PSW, with NHWOC, Mediboo consultant.	Number of Registered staff and PSW educated in the year.	100% of Registered staff and 90% of PSWs to be educated by March 31/26