



Report

<p>Integrated: To divert potentially avoidable emergency department visits (Home Support Services)</p>	<p>% of diversion (# of emergency room diverted comparing with # of emergency calls)</p>	<p>88% (in the last 3 months)</p>	<p>≥80%</p>	<p>Maintain or better than the departmental benchmark</p>	<p>1) To identify the client's needs and health condition change in a timely manner 2) To provide immediate response when needed</p>	<ul style="list-style-type: none"> • HSW will observe the change in client's health condition during the service provision and report to the Supervisor accordingly. • HSW will ask three questions before leaving client's unit; i.e., do you need to use toilet? Do you have any pain or discomfort? Do you need anything before I leave? • Senior/Program Coordinator will review client's care plan quarterly or when needed. • HSW will ensure that the client is taking medication as scheduled. • HSW will observe and report possible side effect of medication in a regular basis. • HSW will provide post fall security check after client's fall incident by using Home Support Post Fall Security Check Template. • HSW will respond to client's emergency call within 5 minutes • HSW will respond to unscheduled request within 15 minutes 	<p>% care plan reviewed every quarter or when needed</p> <p>% of client fall received post fall security check</p> <p>% or emergency call responded within 5 minutes</p>	<p>100% care plan reviewed every quarter or when needed: Achieved</p> <p>100% of client fell received post fall security check: Achieved</p> <p>100% of emergency call responded within 5 minutes</p>
<p>Progress Report</p>		<p>Performing well? Yes or No: Yes</p>						

<p>for the May 2018 CQC</p> <p>91.6%</p>	<p>Had additional change idea that was not included in the QIP? Yes or No: No If Yes, specify:</p> <p>Enter summary here: The percentage of emergency room visit diversion is on target</p>							
<p>Progress Report for the Aug 2018 CQC</p> <p>88.2%</p>	<p>Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: NO If Yes, specify:</p> <p>Enter summary here: The percentage of emergency room visit diversion is on target. Home support worker continues to follow the protocol to monitor the health condition change of client and provides necessary assistance in a timely manner. Program manager-/-Coordinators will review the care plan quarterly or if needed. Mutual learning on care issue and emergency response incidents are share with HSWs in the staff meeting as to equip themselves how to handle similar incidents with competence.</p>							
<p>Progress Report for the Nov 2018 CQC</p> <p>92%</p>	<p>Performing well? Yes or No: YES Had additional change idea that was not included in the QIP? Yes or No: NO If Yes, specify:</p> <p>Enter summary here: The percentage of emergency room visit diversion is on target</p>							
<p>Progress Report for the Feb 2019 CQC</p> <p>92%</p>	<p>Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: No If Yes, specify:</p> <p>Enter summary here: The percentage of emergency room visit diversion is on target.</p>							
<p>Timeliness: To provide Home Support service to client on the same day of hospital discharge. (Home Support Services)</p>	<p>% of client received services on the same day of hospital discharge</p>	<p>100%</p>	<p>Maintain current performance</p>	<p>Maintain</p>	<p>1) To provide Home Support service within the same day of client's discharge from hospital.</p>	<ul style="list-style-type: none"> Senior/Program Coordinator will work closely with the client's family and with the hospital discharge planner during hospitalization period. Senior/Program Coordinator will involve Home and Community Care of LHIN and the client's family to have needed equipment in place before the client is discharge from hospital. On the day of the discharge, the client's need is reviewed /assessed or anticipated and then 	<p>% of hospitalization case involving open communication prior to hospital discharge</p>	<p>100% open communication prior to hospital discharge</p>

						<p>home support service is provided accordingly.</p> <ul style="list-style-type: none"> If the discharge is anticipated, Senior/Program Coordinator will inform HSW to get them prepared and provide home support service as soon as the client is back from hospital. 		
Progress Report for the May 2018 CQC 100%	Performing well? Yes or No: yes Had additional change idea that was not included in the QIP? Yes or No: no If Yes, specify: Enter summary here: Performance on timeliness to provide home support services to clients on the same day of their hospital discharge is meeting target.							
Progress Report for the Aug 2018 CQC 100%	Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: No If Yes, specify: Enter summary here: 100% for providing same day services to clients returning home from hospital. Clients and their family members will let us know when they are going to be discharged from hospital so that we can provide services within the same day of discharge from hospital.							
Progress Report for the Nov 2018 CQC 100%	Performing well? Yes or No: YES Had additional change idea that was not included in the QIP? Yes or No: NO If Yes, specify: Enter summary here: Performance on timeliness to provide home support services to clients on the same day of their hospital discharge is meeting target							
Progress Report for the Feb 2019 CQC 100%	Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: No If Yes, specify: Enter summary here: Performance on timeliness to provide home support services to clients on the same day of their hospital discharge is meeting target							
Resident-Centred: Timely acknowledgement of complaints	% of complaints acknowledged to the clients who made a complaint within 6 to 10 business days	100%	100%	maintain	<ul style="list-style-type: none"> To provide immediate acknowledgement when the complaint is received 	<ul style="list-style-type: none"> Upon the receipt of complain, the person who received the complaint will provide acknowledgement 	% of acknowledgement make within 6-10 days	Achieved (No complaints received)

Progress Report for the May 2018 CQC (Home Support Services)	Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: no If Yes, specify: Enter summary here: No complaint was received							
Progress Report for the Aug 2018 CQC	Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: No If Yes, specify: Enter summary here: No complaint was received							
Progress Report for the Nov 2018 CQC	Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: NO If Yes, specify: Enter summary here: No Complaint was received							
Progress Report for the Feb 2019 CQC	Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: No If Yes, specify: Enter summary here: No complaint was received							
Timeliness: To provide service to newly admitted client within 7 days of admission (Home Support Services)	% of service provision within 7 days of admission	100 % in the last year	100%	Maintain	<ol style="list-style-type: none"> 1) To identify client's care needs 2) To develop care plan jointly with client and family to meet client's care needs 3) To provide home support services according to client's needs within 7 days of admission 	<ol style="list-style-type: none"> 1) Identify client's needs by reviewing the transfer documents via IAR or HPG or conduct an assessment with client and family using InterRAI CHA, 2) Sign needed document; consent, service agreement, etc. 3) Perform safety and risk assessment and check if the equipment needed for the provision of services are in place 4) Create care plan with input from client and caregiver 5) Create a service schedule considering client's preference and needs 	% of service agreement signed % of individualized service schedule done for client % of care plan made for client % of care planning involving client % of safety and risk assessment done with client	100% service agreements signed 100% individualized service schedule 100% care plan made for client 100% of care planning involved clients 100% of safety and risk assessment done

Progress Report for the May 2018 CQC 100%	Performing well? Yes or No: yes Had additional change idea that was not included in the QIP? Yes or No: no If Yes, specify: Enter summary here: Performance on timeliness to provide home support services to clients within 7 days of admission to the program is meeting target							
Progress Report for the Aug 2018 CQC 100%	Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: No If Yes, specify: Enter summary here: Performance on timeliness to provide home support services to clients within 7 days of admission to the program is meeting target							
Progress Report for the Nov 2018 CQC 100%	Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: No If Yes, specify: Enter summary here: Performance on timeliness to provide home support services to clients within 7 days of admission to the program is meeting target							
Progress Report for the Feb 2019 CQC 100%	Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: No If Yes, specify: Enter summary here: Performance on timeliness to provide home support services to clients within 7 days of admission to the program is meeting target							
To reduce avoidable hospital re-admission within 7 days of hospital discharge (Home Support Services)	% of client re-admission to hospital within 7 days of hospital discharge	7.5% (in the last three months)	$\leq 10\%$	Maintained or better than the current benchmark	<ol style="list-style-type: none"> 1) To identify client needs and health condition change right after the hospital discharge 2) Adjust care plan to meet the changing needs 3) Provide the service according the changing needs 4) Monitor client's condition 	<ol style="list-style-type: none"> 1) HSW/Coordinator visit the client on the same day of hospital discharge to review client's condition and care needs 2) To provide immediate service to client at the same day of hospital discharge such as: security check, meal service, medication reminder, 3) Work with client/family/ pharmacist to ensure client follow the medication regime. 4) Re - assess the client need using InterRAI CHA and review the discharge note 5) To develop a revised care plan with input from client and family 	% of visit at the same day of hospital discharge % of service provision at the same day of hospital discharge % of the return assessment	100% visit at the same day of hospital discharge: Achieved 100% services provision at the same day of hospital discharge: Achieved 100% of the return assessment done

						6) Increase the number of security check to ensure that client's condition is well-monitored 7) To encourage client and family to follow – up with family doctor or specialist when needed		
Progress Report for the May 2018 CQC 2.5%	Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: no If Yes, specify: Enter summary here: The percentage of readmission to hospital within 7 days is on target							
Progress Report for the Aug 2018 CQC 0%	Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: No If Yes, specify: Enter summary here: The percentage of readmission to hospital within 7 days is on target							
Progress Report for the Nov 2018 CQC 0%	Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: No If Yes, specify: Enter summary here: The percentage of readmission to hospital within 7 days is on target							
Progress Report for the Feb 2019 CQC 12%	Performing well? Yes or No: Yes Had additional change idea that was not included in the QIP? Yes or No: No If Yes, specify: Enter summary here: a total of 25 clients of our department were discharged from hospital and 3 of them were readmitted to hospital within 7 days. The readmission percentage is 12%. Yee Hong standard is 10%. The programs will continue to provide personal support to clients discharged from hospital and monitor the data.							