

CHSLD Bayview Inc.  
**Quality and Performance Measurement Report (2022-2023)**  
**(Q4) Periods 11-13**

<b>Quadrant: Resident Focus</b>
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**1. Admissions / Discharges**

**A) Admissions Profile**

- Demographics of Bayview residents

(Source: 4781-AS-478)

Age Group	Admissions		Discharges (transfer/death)	
	2022/2023	2021/2022	2022/2023	2021/2022
0-24 years	0	0	0	0
25-34 years	0	0	0	0
35-44 years	0	0	0	0
45-54 years	1	0	0	0
55-64 years	1	3	1	0
65-69 years	0	1	0	0
70-74 years	1	1	2	1
75-79 years	5	2	3	0
80-84 years	7	3	6	2
85-89 years	10	7	5	5
90 years or more	18	15	26	17
<b>Totals</b>	<b>43</b>	<b>32</b>	<b>43</b>	<b>25</b>

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<b>Quadrant: Resident Focus (cont'd)</b>
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**B) Resident Turnover**

(Source: Admissions department)

	Q1	Q2	Q3	Q4	Total 2022/2023
<b># of Residents Discharged</b>	8	9	13	13	43
<b># of Residents Admitted</b>	8	10	12	13	43

**2. Resident Satisfaction**

Result of the General Satisfaction Survey -- All Residents; every 4 years  
 (Source: DQRS -- Bayview Resident Satisfaction Survey Report)

Target over 75%

Year	Number of Survey Responses	Overall Satisfaction Rate
<b>2022</b>	<b>55/124 (in-house survey)</b>	<b>87%</b>
2018	54/120 (in-house survey)	88%
2014	54/120 (in-house survey)	86%

Results of the Annual Resident Satisfaction Survey -- New admissions  
 (Source: DQRS-Bayview Resident Satisfaction Survey Report)

Target over 75%

Year	Number of Survey Responses	Overall Satisfaction Rate
2021	19/30	82%
2020	16/40	92%
2019	20/37	89.21%

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**3. Formal Complaint / Mistreatment Reports (Source: SQCC) (Target: 0)**

Report Type	Q1	Q2	Q3	Q4	To date 2022/2023	Total 2021/2022	Total 2020/2021
<b>Formal Complaints to SQCC:</b> (Dissatisfaction with care or services/violation of rights)	0	0	0	0	0	0	3
Founded					0	0	1
Unfounded					0	0	2
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>
<b>Assistances by SQCC:</b> (Facilitation to have a concern addressed)	0	0	0		0	1	2
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>2</b>
<b>Reports of mistreatment of residents:</b> (Violence/neglect that causes harm or distress)	0	0	0		0	0	1
Founded	0	0			0	0	0
Unfounded		0			0	0	1
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>

**4. Ethical Issues**

Total number of times the formal consultation process was applied to address an ethical issue (Source SMT)

Year	# to date
2022/2023	0
2021/2022	0

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<b>Quadrant: Internal Processes - Clinical Programs</b>
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**1. Restraint Use**

Overall use of restraints and by type, as per the established minimal use protocol  
 (Source: Nursing Department Restraint Data) (Target: less than 5%)

# of residents using the specific restraint type  
 # of residents (128)

**A) % of Residents Using Physical Restraints (excluding AEAB)**

Year	P1	P2	P3	P4	P5	P6	P7	P8	P9	P10	P11	P12	P13
<b>2022/2023</b>	3.90%	3%	3%	3%	3%	4%	3%	2.30%	2.30%	2.30%	<b>3.10%</b>	<b>3.10%</b>	<b>3.10%</b>
2021/2022	0.00%	5%	4%	4%	4%	3%	4%	2.30%	3.10%	3.10%	3.90%	4.70%	2.30%
2020/2021	*	*	*	*	1.80%	2.80%	2.50%	2.50%	3.40%	3.40%	4.20%	2.50%	2.50%

**B) % of Residents Using AEAB (anti-elopement alarm bracelet)**

Year	P1	P2	P3	P4	P5	P6	P7	P8	P9	P10	P11	P12	P13
<b>2022/2023</b>	100.00%	3.10%	5.50%	6%	6%	6%	7%	7.00%	7.00%	7.00%	<b>7.00%</b>	<b>7.80%</b>	<b>7.80%</b>
2021/2022	8.30%	7.50%	6.50%	4%	5%	5%	5%	7.00%	8.60%	8.60%	3.90%	<b>5%</b>	7.80%
2020/2021	0	*	*	*	7.20%	7.50%	8.60%	7.80%	9.40%	9.40%	10.10%	11%	8.30%

\*Data not collected due to pandemic

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<b>Quadrant: Internal Processes - Clinical Programs (cont'd)</b>
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**2. Compliance to Restraint Protocol**

Rate of compliance to the required procedure of safety checks and sign off (Target : Improve by 10% per audit)

(Source: Nursing Department – Audit using Management Grid for the Use of Restraints)

# of flow sheets that indicate compliance

# of flow sheets audited

	# flow sheets in compliance			# audited flow sheets			% 2022			% 2021			% 2020		
	Night	Day	Eve	Night	Day	Eve	Night	Day	Eve	Night	Day	Eve	Night	Day	Eve
Audit 1 (June 2022)	0	4	4	N/A	4	4	N/A	100%	100%	0%	80%	80%	N/A	0%*	50%
Audit 2 (November 2022)	0	3	3	1	3	3	100%	100%	100%	N/A	40%	67%	N/A	45%	50%

\*Noncompliance due to pandemic -- Care plans not updated

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**Quadrant: Internal Processes - Clinical Programs (cont'd)**

**3. High Volume Medication Use**

% of residents that use greater than 9 different, regular medications (excluding: laxatives/eye drops/vitamins/ creams)

(Source: Nursing Department - DON) (Target: 15% or less)

# of residents who take more than 9 medications as indicated above (evaluated per period)

# of residents (128)

Period	# of residents using more than 9 medications	% 2022/2023	% 2021/2022	% 2020/2021
Q1 & Q2 (October 2022)	29	22.65%	18%	14.50%
Q3 & Q4 (March 2023)	30	23%	17%	14%

**4. Documentation**

Rate of compliance to the standards of nursing documentation in resident's file.

(Source: Nursing Department -- Audit of charts) (Target: 80% or greater)

# of files with proper documentation

# of resident files audited

	# of files in compliance	# audited files	% 2022/2023	% 2021/2022	% 2020/2021
Audit 1 (July 2022)	27	32	84.00%	40.60%	81.30%
Audit 2 (January 2023)	26	32	81.00%	46.80%	65.60%

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**Quadrant: Internal Processes - Risk and Safety**

**1. Incident/Accident Report Data (per quarter of fiscal year)**  
 (Source: Risk Management Committee - Event Report Summary)

**A) Total Declared Events**

	Q1	Q2	Q3	Q4	To date 2022/2023	Total 2021/2022	Total 2020/2021
<b>Total Events:</b>	188	124	150	142	604	456	458
<b>Accidents (consequences) (E1 – F)</b>	118	76	90	74	358	232	194
-Minor (E1)	0	76	86	74	236	219	178
-Major (E2)	0	0	2	0	2	9	1
-Major (F)	0	0	2	0	2	1	4
<b>Sentinel Events (G – I)</b>	0	0	0	0	0	0	0
<b>Accidents (no consequences) (C &amp; D)</b>	0	44	54	62	160	200	251
<b>Incidents (A &amp; B)</b>	6	4	6	6	22	24	13

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**Quadrant: Internal Processes - Risk and Safety (cont'd)**

**B) # of Events by Type**

Type of Event	Q1		Q2		Q3		Q4		To date 2022/2023	Total 2021/2022	Total 2020/2021
	Current	Last Year									
Falls (A)	44	36	33	43	45	26	58	30	180	135	235
Medication errors (B1)	25	27	14	16	15	20	11	23	65	86	84
Other Clinical Events (B2, B3)	6	4	5	4	3	2	8	4	22	14	19
Diagnostic Tests (C)	0	0	0	0	0	0	0	0	0	0	0
Material/Equipment (E)	2	0	0	0	1	2	1	0	4	2	0
Abuse/Aggression (F)	0	1	0	0	1	5	0	4	1	10	8
Other (G)	107	60	72	43	85	51	64	55	328	209	113
-Injury of known origin	0	10	11	7	9	9	9	9	29	35	19
-Injury of unknown origin	86	32	53	27	63	25	50	36	252	120	71
-Newly acquired pressure sore (Stage II or more)	1	3	2	0	1	5	2	1	6	9	5
-Restraint related	1	0	0	0	0	0	0	0	1	0	0
-Misc	6	15	6	9	12	12	3	9	27	45	27

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**Quadrant: Internal Processes - Risk and Safety (cont'd)**

**C) Number of Reported Events Related to Falls**

	Q1	Q2	Q3	Q4	To date 2022/2023	Total 2021/2022	Total 2020/2021
<b>Total # of Falls</b>	44	33	45	58	180	135	235
<b>Flagged as frequent fall events</b>	2	5	8	15	30	22	48
<b>Total # of different residents who fell</b>	24	18	26	30	45	40	108
<b>Falls with severe consequence (E2-I)</b>	0	0	4	0	4	8	2

**D) Number of Reported Events Related to Medication Errors**

	Q1	Q2	Q3	Q4	To date 2022/2023	Total 2021/2022	Total 2020/2021
<b># of Medication Errors</b>	25	14	15	11	65	86	84
<b>Errors with Consequence (Severity of E1 or Greater)</b>	1	0	0	0	1	2	0

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**E) Medication Errors By Type**

Type	Q1	Q2	Q3	Q4	To date 2022/2023	Total 2021/2022	Total 2020/2021
1.Wrong Medication	0	0	0	0	0	2	1
2.Wrong Time	2	1	0	0	3	0	3
3.Wrong Dose	3	2	0	1	6	5	7
4.Wrong Resident	0	1	0	0	1	3	2
5.Omission	7	3	2	1	13	36	38
6.Transcription	0	0	0	1	1	3	5
7.Disc./Given	0	0	0	0	0	2	0
8.Patch	5	3	3	1	12	13	15
9.Other	8	4	10	7	29	22	13
<b>Total</b>	25	14	15	11	65	86	84

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<b>Quadrant: Internal Processes - Risk and Safety (cont'd)</b>
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**2. Infection Rates**

(Source: Nursing Department - Infection Control Binder)

**A) Infections**

# of reported infections  
 # of residents (128)

Year	P1	P2	P3	P4	P5	P6	P7	P8	P9	P10	P11	P12	P13
<b>2022/2023</b>	0%	9%	7%	8%	17%	33%*	9%	10%	51%*	21%*	<b>18%</b>	<b>16%</b>	<b>13%</b>
2021/2022	9%	13%	13%	5%	14,4%	10,4%	10,4%	18,4%	11,2%	12.80%	22%*	11%*	24%
2020/2021	0	36	49	13	9.3	13.1	6.5	13.8	18.2	2.2	21.4	17.9	8.3

\* incl. COVID pos

**B) Number of Infections by Type (per quarter of fiscal year)**

Type	Q1	Q2*	Q3	Q4	To date 2022/2023	Total 2021/2022	Total 2020/2021
<b>UTI</b>	23	12	20	<b>26</b>	<b>91</b>	103	73
<b>URI</b>	5	11	9	<b>13</b>	<b>38</b>	20	82
<b>Pneumonia</b>	5	3	5	<b>2</b>	<b>15</b>	8	6

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<b>Quadrant: Internal Processes - Risk and Safety (cont'd)</b>
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**3. Resident Vaccination Rate**

- % of residents who receive vaccination (Source: Nursing Department - Infection Control Binder) Target: 75% or grea
- # of residents vaccinated  
# of residents (128)

Year	% Influenza	% Pneumovax	% 5th COVID	% 6th COVID
<b>2022/2023</b>	<b>90%</b>	<b>38%</b>	<b>79%</b>	<b>27%*</b>
2021/2022	87%		-	-
2020/2021	88%		-	-

\*Covid cases ineligible

**4. Emergency Drills**

# of Drills (Target: one drill type per quarter / \*one Code Green per year per shift) (Source: Technical Services Manager)

Period	Code Red	Code Yellow	Code White	To date 2022/2023	Total 2021/2022	Total 2020/2021
<b>Q1</b>	1	0	0	1	0	0
<b>Q2</b>	0	0	0	0	4	0
<b>Q3</b>	1	0	0	1	0	2
<b>Q4</b>	2			2	0	2
<b>Total</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>4</b>	<b>4</b>

Shift	Code Green			
<b>*Day</b>	2	2	1	1
<b>*Evening</b>	0	0	0	1
<b>*Night</b>	0	0	0	1
<b>Total</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>3</b>

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<b>Quadrant: Finance</b>
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**1. Employee Education**

**A) Employee Education Rate**

- % of paid education hours

(Source: Payroll Department /AS471)

Year	# Of Paid Education Hours	# Of Total Paid Hours	%
<b>2022/2023</b>	N/A	N/A	<b>N/A</b>
2021/2022	2396	275.38	0.87%
2020/2021	0	238.329	1.01%

**B) Education Costs**

- % of costs for education

(Source: Finance Manager)

Year	Total Cost of Education	Total Salary Cost	%
<b>2022/2023</b>	N/A	N/A	<b>N/A</b>
2021/2022	57.448	10,394,040	0.55%
2020/2021	1	8,497,257	0.75%

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<b>Quadrant: Finance (cont'd)</b>
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**2. Salary Insurance Hours**

- % Salary Insurance Hours  
 (Source: Finance Manager)

Year	# of Salary Insurance Hours	# of Worked Hours	%
<b>2022/2023</b>	N/A	N/A	<b>N/A</b>
2021/2022	15.59	275.38	5.66%
2020/2021	14.859	238.329	6.23%

**3. CSST**

- CSST Information and Cost Rates  
 (Source: Administration - CSST Reports)

Calendar Year	# of CSST Accidents	# of CSST Accidents with costs over 3,200	CSST Bayview Rate/CSST Unit Rate (59030)
<b>2022</b>	N/A	N/A	<b>N/A</b>
2021	1	5	N/A
2020	39	7	N/A

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<b>Quadrant: Work Life</b>
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**1. Employee Vaccination** (Source: Nursing Department - Infection Control Binder) (Target: 60% or greater)

- % of employees who receive influenza vaccination
- # of Employees Vaccinated (Influenza)  
# Employees (total)

Year	% Influenza	% COVID
<b>2022/2023</b>	<b>35%</b>	<b>N/A</b>
2021/2022	41%	91%
2020/2021	52%	53%

**2. Annual Performance Evaluation Completion Rate** (Source: Service Directors) Target: (90% or greater)

- % of completed annual performance evaluations
- # of completed performance evaluations  
# of permanent employees in the service area

	# of permanent posts	# of completed evaluations	% 2022/2023	% 2021/2022	% 2020/2021
<b>Nursing Service</b>	138 present	138	<b>100%</b>	100%	95%
<b>Resident Services</b>	7 were due	7	<b>100%</b>	100%	100%
<b>Support Services:</b>					
-Housekeep/Laundry	10	10	<b>100%</b>	100%	100%
-Kitchen			<b>N/A</b>	100%	100%
-Maintenance			<b>N/A</b>	0	0
-Reception			<b>N/A</b>	0	0
<b>Administration</b>			<b>N/A</b>	50%	40%

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**3. Volunteer Contribution**

- Total Hours Contributed

(Source: Volunteer Department Statistics) (Target: 2% or less)

Year	Total Hours
<b>2022/2023</b>	<b>6608</b>
2021/2022	3650.25
2020/2021	925.75

**4. Overtime Use**

- % of Hours in Paid Overtime (Target: 2% or less)

(Source: AS471)

Year	# of Hours Overtime	Total Paid Hours	%
<b>2022/2023</b>	N/A	N/A	<b>N/A</b>
2021/2022	0	275.38	1.76%
2020/2021	3159	238.329	1.33%

**5. Employee Assistance Program Use**

- Employee requests made for service

(Source: EAP Provider Report)

Period	# of employees requesting services	To date 2022/2023	Total 2021/2022	Total 2020/2021
<b>Q1 &amp; Q2</b>	5	5	14	11
<b>Q3 &amp; Q4</b>	N/A	N/A	8	9
<b>Total</b>	5	5	22	20

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**6. Work-related Accident Event Reports** (Source: OHS Committee)

- Total number of work-related accident events by type

	Q1	Q2	Q3	Q4	To date 2022/2023	Total 2021/2022	Total 2020/2021
1. No injury	4	0	1	0	5	7	3
2. Musculo-skeletal	9	12	10	6	37	32	14
3. Bruise/cut/scrape	4	5	4	3	16	26	12
4. Needlestick	0	0	0	0	0	1	1
5. Burn	0	1	0	0	1	3	1
6. Other	0	0	0	1	1	0	37
<b>Total</b>	<b>17</b>	<b>18</b>	<b>15</b>	<b>10</b>	<b>60</b>	<b>70</b>	<b>66</b>
<b>Lost time events</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>34</b>

**7. Workplace Violence** (Source: Administration)

- Total number of reports made

WPV Classification	Q1	Q2	Q3	Q4	To date 2022/2023	Total 2021/2022	Total 2020/2021
Type 1 (Criminal Intent) Perpetrator has no relationship to the workplace	0	0	0	0	0	0	0
Type 2 (Client) Resident, family member or visitor becomes violent towards an employee	0	0	0	0	0	6	0
Type 3 (Employee) Perpetrator is an employee or past employee of the workplace	0	0	0	0	0	2	2
Type 4 (Personal Relationship) Perpetrator has a personal relationship with the employee (domestic violence)	0	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>8</b>	<b>2</b>

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**8. Employee Grievance Rate**

- Total # of grievances made

(Source: Executive Director)

To Date 2022/2023	Total 2021/2022	Total 2020/2021
7*	0	3

\*3 related to collective pay equity/premium grievances

**9. Employee Departure**

- Total # of employees who departed after period of probation

(Source: Payroll Department)

Reason for departure	Total 2022/2023	Total 2021/2022	Total 2020/2021
Other employment	13	3	1
Retirement	7	8	6
Other	6	8	18
Termination	3	0	0
<b>Total</b>	<b>29</b>	<b>19</b>	<b>25</b>