

CHSLD Bayview Inc.  
**Quality and Performance Measurement Report (2025-2026)**  
**(Q3) Periods 8-10**

<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)	
	2025/2026 to date	2024/2025	2025/2026 to date	2024/2025
0-24 years	0	0	0	0
25-34 years	0	0	0	0
35-44 years	0	0	0	0
45-54 years	0	0	0	0
55-64 years	0	1	1	0
65-69 years	0	2	0	0
70-74 years	0	0	2	1
75-79 years	1	2	1	0
80-84 years	6	3	1	3
85-89 years	1	6	4	6
90 years or more	11	10	11	14
<b>Totals</b>	<b>19</b>	24	<b>20</b>	24

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**Quadrant: Resident Focus (cont'd)**

**B) Resident Turnover**

(Source: Admissions department)

	Q1	Q2	Q3	Q4	Total 2025/2026
<b># of Residents Discharged</b>	7	7	5	0	19
<b># of Residents Admitted</b>	7	7	6	0	20

**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
<b>2025</b>	<b>20/24</b>	<b>83,3%</b>
2024	25/42	89,6%
2023	20/43	81%

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**Quadrant: Resident Focus (cont'd)**

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

Report Type	Q1	Q2	Q3	Q4	To date 2025/2026	Total 2024/2025	Total 2023/2024
<b>Formal Complaints to SQCC:</b> (Dissatisfaction with care or services/violation of rights)	0	0	0	0	0	1	0
Founded	0	0	0	0	0	1	0
Unfounded	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>1</b>	<b>0</b>
<b>Assistances by SQCC:</b> (Facilitation to have a concern addressed)	0	0	0	0	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>2</b>
<b>Reports of mistreatment of residents:</b> (Violence/neglect that causes harm or distress)	0	0	0	0	0	0	0
Founded	0	0	0	0	0	0	0
Unfounded	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>0</b>	<b>0</b>

**4. Ethical Issues**

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

Year	# to date
2025/2026	0
2024/2025	1

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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
2025/2026	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%			
2024/2025	2.30%	2.30%	2.30%	2.30%	2.30%	2.30%	2.30%	2.30%	2%	2%	2.30%	2.30%	2.30%
2023/2024	3.10%	2%	2%	2%	0,7%	0,7%	2,3%	2,3%	2,3%	2,3%	2,3%	2,3%	2.30%

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

Year	P1	P2	P3	P4	P5	P6	P7	P8	P9	P10	P11	P12	P13
2025/2026	11.70%	10.10%	10.10%	10.10%	10.10%	10.10%	10.10%	9.37%	9.37%	9.37%			
2024/2025	5.40%	5.40%	5.40%	5.40%	6.20%	6.20%	7.80%	8.50%	9.30%	9.30%	8.59%	9.30%	9.30%
2023/2024	7.80%	7.00%	6.20%	6,20%	6,2%	5,4%	5,4%	5,4%	5,4%	5,4%	5,4%	6,2%	5.40%

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

**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			% 2025			% 2024			% 2023		
	Night	Day	Eve	Night	Day	Eve	Night	Day	Eve	Night	Day	Eve	Night	Day	Eve
Audit 1 (May 2025)	4	4	4	5	5	5	80%	80%	80%	60%	80%	60%	100%	75%	50%
Audit 2 (November 2025)	1	3	3	2	3	3	50%	100%	100%	50%	67%	100%	100%	75%	100%

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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	% 2025/2026	% 2024/2025	% 2023/2024
Q1 & Q2 (October 2025)	31	24,22%	21,09%	24,22%
Q3 & Q4 (March 2026)			21,87%	27,34%

**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	% 2025/2026	% 2024/2025	% 2023/2024
Audit 1 (July 2025)	26	32	81.00%	84.00%	59.00%
Audit 2 (January 2026)	24	32	75.00%	84.00%	75.00%



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<b>Quadrant: Internal Processes - Risk and Safety</b>
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**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 2025/2026	Total 2024/2025	Total 2023/2024
<b>Total Events:</b>	178	119	116		413	451	503
<b>Accidents (consequences) (E1 – F)</b>	120	79	76		275	246	285
-Minor (E1)	117	79	74		270	237	276
-Major (E2)	2	0	0		2	6	6
-Major (F)	1	0	2		3	2	2
<b>Sentinel Events (G – I)</b>	0	0	0		0	0	0
<b>Accidents (no consequences) (C &amp; D)</b>	55	35	39		129	153	194
<b>Incidents (A &amp; B)</b>	3	5	1		9	31	24

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**(Q2) Periods 5-7**

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

**B) # of Events by Type**

Type of Event	Current	Last Year	To date 2025/2026	Total 2024/2025	Total 2023/2024						
	Q1	Q2	Q3	Q4							
<b>Falls</b>	52	40	32	32	34	44		32	<b>118</b>	148	197
<b>Medication errors</b>	11	17	12	13	8	13		14	<b>31</b>	57	32
<b>Other Clinical Events</b>	1	11	4	6	0	3		1	<b>5</b>	21	13
<b>Diagnostic Tests</b>	0	0	0	0	0	0		0	<b>0</b>	0	0
<b>Material/Equipment</b>	0	0	0	0	0	0		1	<b>0</b>	1	3
<b>Abuse/Aggression</b>	0	0	0	0	0	0		0	<b>0</b>	0	4
<b>Other</b>	106	55	71	44	69	43		62	<b>246</b>	204	246
-Injury of known origin	4	7	7	3	8	7		5	<b>19</b>	22	30
-Injury of unknown origin	93	41	59	30	57	31		55	<b>209</b>	157	179
-Newly acquired pressure sore (Stage II or more)	0	0	0	0	0	0		0	<b>0</b>	0	4
-Restraint related	0	0	0	0	0	0		0	<b>0</b>	0	0
-Misc	9	7	5	11	4	5		2	<b>18</b>	25	34

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<b>Quadrant: Internal Processes - Risk and Safety (cont'd)</b>
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**C) Number of Reported Events Related to Falls**

	Q1	Q2	Q3	Q4	To date 2025/2026	Total 2024/2025	Total 2023/2024
<b>Total # of Falls</b>	52	32	34		118	148	197
<b>Flagged as frequent fall events</b>	1	0	0		1	1	11
<b>Total # of different residents who fell</b>	39	25	28		92	111	108
<b>Falls with severe consequence (E2-I)</b>	0	0	2		2	0	5

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

	Q1	Q2	Q3	Q4	To date 2025/2026	Total 2024/2025	Total 2023/2024
<b># of Medication Errors</b>	11	12	8		31	57	32
<b>Errors with Consequence (Severity of E1 or Greater)</b>	1	0	0		1	2	0

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

**E) Medication Errors By Type**

Type	Q1	Q2	Q3	Q4	To date 2025/2026	Total 2024/2025	Total 2023/2024
1.Wrong Medication	1	0	0		0	2	3
2.Wrong Time	0	0	0		0	2	0
3.Wrong Dose	1	1	2		4	12	8
4.Wrong Resident	0	0	0		0	0	0
5.Omission	4	5	6		15	18	8
6.Transcription	0	0	0		0	1	2
7.Disc./Given	0	0	0		0	0	0
8.Patch	3	1	2		6	2	3
9.Other	2	5	2		9	15	8
<b>Total</b>	<b>11</b>	<b>12</b>	<b>12</b>		<b>35</b>	<b>49</b>	<b>32</b>

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

**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
2025/2026	9%	13%	7%	11%	14%	9%	10%	8%	6%	30%			
2024/2025	7%	9%	6%	13%	12%	16%	30%	23%	15%	22%	19%	9%	19%
2023/2024	9%	10%	20%	11%	8%	7%	18%	23%	15%	27.00%	18%	28%	56%

\*P7: the report indicates an increase in URI (Upper Respiratory Infection) cases

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

Type	Q1	Q2	Q3	Q4	To date 2025/2026	Total 2024/2025	Total 2023/2024
UTI	19	15	11		45	62	75
URI	11	5	10		26	45	76
Pneumonia	2	1	1		4	16	24
Rashes	1	1	0		2	18	N/A
Infected Wounds	13	5	2		20	19	N/A
Eyes/Feet	2	2	3		7	12	N/A
Ear	2	1	1		4	5	N/A
C-difficile	0	0	0		0	3	N/A
COVID	0	10	0		10	24	N/A
Others	2	3	17		22	25	N/A
<b>TOTAL</b>	52	43	45	0	140	229	175

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

**3. Resident Vaccination Rate**

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

Year	% influenza	% pneumovax	%7th COVID	%8th COVID	%9th COVID	%10th COVID	%11th COVID	RSV	Shingles
2025/2026	85%	11%	N/A	N/A	N/A	70%	83%	86%	2%
2024/2025	87%	0%	62%	75%	79%	N/A	N/A	85%	97%
2023/2024	89%	39%	14%	N/A	N/A	N/A	N/A	N/A	N/A

**4. Emergency Drills (Source: Technical Services Manager)**

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

Period	Code Red	Code Yellow	Code White	Code Green	To date 2025/2026	Total 2024/2025	Total 2023/2024
Q1	0	0	1	0	1	0	0
Q2	1	0	0	0	1	0	0
Q3	0	0	0	1	1	0	1
Q4	0	0	0	0	0	0	2
<b>Total</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>3</b>	<b>0</b>	<b>3</b>

Shift	Code Red	Code Yellow	Code White	Code Green	To date 2025/2026
Day	1	0	0	0	1
Evening	0	0	1	1	2
Night	0	0	0	0	0
<b>Total</b>	<b>1</b>	<b>0</b>	<b>1</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>2025/2026 to date</b>	<b>1116,15</b>	<b>211 600</b>	<b>0,53%</b>
2024/2025	4414,33	331 600	1,33%
2023/2024	4961,8	307 246	1,61%

**B) Education Costs**

- % of costs for education

(Source: Finance Manager)

Year	Total Cost of Education	Total Salary Cost	%
<b>2025/2026 to date</b>	<b>40 709,19</b>	<b>11 394 707,91</b>	<b>0,36%</b>
2024/2025	145 377,39	12 219 514,6	1,19
2023/2024	139 995	10 464 178	1,34

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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>2025/2026 to date</b>	<b>13 950,75</b>	<b>211 600</b>	<b>6.59%</b>
2024/2025	15 645,7	331 600	4.72%
2023/2024	19 424	307 246	6.32%

**3. CNESST**

- CNESST Information and Cost Rates

(Source: Administration - CNESST Reports)

Calendar  Year	# of CNESST Accidents	# of CNESST Accidents with costs over 3,200	CNESST Bayview Rate/CNESST Unit Rate (59030)
<b>2025/2026 to date</b>	<b>7</b>	<b>7</b>	<b>N/A</b>
<b>2024/2025</b>	<b>12</b>	<b>12</b>	<b>N/A</b>
2023/2024	12	12	N/A

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**Quadrant: Work Life**

**1. Employee Vaccination** (Source: Nursing Department - Infection Control Binder) (Target: 50% or greater)

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

Year	% Influenza	% COVID
<b>2025/2026 to date</b>	<b>20%</b>	<b>5%</b>
2024/2025	16%	2%
2023/2024	23%	29%

**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	% 2025/2026	% 2024/2025	% 2023/2024
<b>Nursing Service</b>			N/A	98%	89%
<b>Resident Services</b>			N/A	100%	100%
<b>Support Services:</b>					
-Housekeep/Laundry			N/A	77%	N/A
-Kitchen			N/A	N/A	N/A
-Maintenance			N/A	50%	N/A
-Reception			N/A	100%	N/A
<b>Administration</b>			N/A	66,7%	N/A

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<b>Quadrant: Work Life (cont'd)</b>
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**3. Volunteer Contribution**

- Total Hours Contributed

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

Year	Total Hours
<b>2025/2026</b>	
2024/2025	7024
2023/2024	6799

**4. Overtime Use**

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

(Source: AS471)

Year	# of Hours Overtime	Total Paid Hours	%
<b>2025/2026 to date</b>	6999	211 600	3.31%
2024/2025	9039	331 600	3%
2023/2024	9246	307 246	3.00%

**5. Employee Assistance Program Use**

- Employee requests made for service

(Source: EAP Provider Report)

Period	# of employees requesting services	To date 2025/2026	Total 2024/2025	Total 2023/2024
<b>Q1 &amp; Q2</b>	6	6	9	6
<b>Q3 &amp; Q4</b>	0	0	15	0
<b>Total</b>	0	6	24	6

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**Quadrant: Work Life (cont'd)**

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

- Total number of work-related accident events by type

	Q1	Q2	Q3	Q4	To date 2025/2026	Total 2024/2025	Total 2023/2024
1. No injury	3	2	2		7	16	0
2. Musculo-skeletal	7	17	1		25	23	50
3. Bruise/cut/scrape	7	0	0		7	5	8
4. Needlestick	0	0	0		0	0	0
5. Burn	0	0	0		0	2	0
6. Other	0	0	0		0	2	2
Lost time events	0	0	0		0	0	0
<b>Total</b>	17	19	3		39	48	60

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

- Total number of reports made

WPV Classification	Q1	Q2	Q3	Q4	To date 2025/2026	Total 2024/2025	Total 2023/2024
Type 1 (Criminal Intent) Perpetrator has no relationship to the workplace	0	0	0		0	0	0
Type 2 (Client) Resident, family member or visitor becomes violent towards an employee	0	0	0		0	0	0
Type 3 (Employee) Perpetrator is an employee or past employee of the workplace	0	0	0		0	0	0
Type 4 (Personal Relationship) Perpetrator has a personal relationship with the employee (domestic violence)	0	0	0		0	0	0
<b>Total</b>	0	0	0		0	0	0

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**8. Employee Grievance Rate**

- Total # of grievances made

(Source: Executive Director)

To Date 2025/2026	Total 2024/2025	Total 2023/2024
0	2	4

**9. Employee Departure**

- Total # of employees who departed after period of probation

(Source: Payroll Department)

Reason for departure	Total to date 2025/2026	Total 2024/2025	Total 2023/2024
Other employment	9	16	32
Retirement	9	7	3
Other*	2	5	0
Termination	6	9	11
Total	26	37	46

\* = sick leave, end of contract, termination during probation