


### All Teams

#### Strategic Plan

 **To complete** 0365 implementations by **Q2 2023**.



Achieved


#### Strategic Plan

 **To finalize** the Care Centre's electronic Visitor Handbook and add to website for increased well-being and meaningful visits within LTC by **Q2 2023**.



Achieved

#### Strategic Plan

 **To transfer** the website to Barefoot, the new host for a more robust site, and go live by **Q2 2023**.




Achieved

\*Trinity Village Website launched on January 4th, 2024.

### Finance


#### Strategic Plan

 **To research** finance duties and processes to determine those that can be automated by end of **Q4 2023**.



Achieved

#### Strategic Plan


 **To upgrade and audit** the current Payroll System "ADP" by end of **Q2 2024**.



On Track

### Human Resources


#### New Initiative

 **To integrate** an HRIS system for all Trinity Village employees by end of **Q4 2023**.



Achieved

#### Strategic Plan


 **To complete** the TV staff routines and orientation review, revise the handbook to include a supplement for each discipline (66) and compile it into one Job Manual by end of **Q4 2023**.



Achieved

### ADP

#### New Initiative


 **To implement** at least one per month community-based program/events on-site for caregivers and current clients, as well as waitlist and potential clients by end of **Q4 2023**.



Achieved

### Information Technology

#### Quality Improvement

 **To improve** the overall Internet performance by redirecting the three internet sources to the best Internet provider by **Q2 2023**.



Achieved


#### Quality Improvement

 **To Enhance** Security by installing a new and improved Sophos firewall appliance by **Q2 2023**.



Achieved


#### Quality Improvement

 **To move** to a Managed Services model to allow for improved remote management/control and a proactive approach to resolving issues before they become a problem by **Q3 2023**.



Achieved

#### Quality Improvement


 **To replace** all Access Points with a new, faster product and install a management tool for improved performance and monitoring by **Q1 2023**.



Achieved

### Horticulture


#### Quality Improvement

 **To repair** the pathway through the Community Garden and install a second pathway to create a circular route in the area by the end of **Q2 2023**.



Achieved


#### New Initiative

 **To research** the benefits of a formal tree replacement program, including a memorial arboretum/plant, by end of **Q4 2023**.



Achieved


#### Quality Improvement

 **To introduce** a plant library for TVCC with a cart that goes around bi-weekly to offer plants and resident inclusive plant care that includes exchanging weathered plants that need extra care for a healthy plant of the same kind by end of **Q4 2023**. Reason: To be continued in 2024.



Delayed


#### New Initiative

 **To design** a free-standing mobile kiosk to benefit Honey sales and education **Q3 2023**.



Achieved


#### Quality Improvement

 **To capture** the horticultural encounters in the garden from residents, staff, family, and visitors by **Q4 2023**.



Achieved

#### Health & Safety


 **To resolve** three tree roots raised grates trip hazards in TVCC Centreville Courtyard by **Q2 2023**.



Achieved

Nursing


New Initiative

 **To complete** PCC/IPAC tracking software implementation by end of **Q4 2023**.



Achieved


Staff Satisfaction

 **To replace** four remaining medication carts on houses to reduce the risk of staff injury by **Q4 2023**.



Achieved


Quality Improvement

 **To decrease** annual TVCC staff medication incidents from 85 to 72 by end of **Q4 2023**.



Achieved

Health and Safety


 **To reduce** the number of COVID outbreak duration from 30 days to 20 by end of **Q4 2023**.



Achieved

Nutrition


Quality Improvement

 **To continue** to move the manual show plate process to the MealSuite online show plate feature to reduce waste and have consistency between FSWs setting up meals by end of **Q4 2023**.



Achieved

Quality Improvement


 **To reduce** the number of residents on the poor fluid intake weekly list from 19% to 15% by end of **Q4 2023**.

**Reason:** As of December 27th 2023, there are 25 residents (16.7%) on the low fluid list. Too many variables and factors. During outbreaks, we have determined fluid intake appears to be lower otherwise believe we would have achieved.



Not Going to Meet Objective


Quality Improvement

 **To evaluate** 10 care plans weekly to simplify and implement new interventions listed in Nutrition Care Plan Library to allow for easier staff reference and easier generation of reports by **Q4 2023**.



Achieved

Quality Improvement

 **To reduce** the number of residents with individual needs/wishes receiving special sticker items from 70% to 60% by end of **Q4 2023**.


**Reason:** 130/146 residents currently have special sticker items/day= 89% of residents.



Not Going to Meet Objective

Programming

Strategic Plan


 **To fully implement** cable services and in-room TV channels in all 150 rooms at TVCC by the beginning of **Q3 2023**.

**Reason: Glitch with app software. Waiting for IntouchLink & Samsung Canada to resolve. The program is working in common area TVs.**



Delayed

Quality Improvement


 **To rebuild** the TVCC volunteer program by redesigning a position with dedicated hours to include recruiting, training, and coordination of the current pool from 13 to 26 by end of **Q4 2023**.



Achieved

Environmental


Quality Improvement

 **To complete** the introduction of iPads as part of communication improvement. Delayed from 2022 while we introduce the new Care Clean module. The plan is to fully operational by the end of **Q2 2023**.



Achieved


Quality Improvement

 **Additional FOB** upgrade for all five med rooms by **Q1 2023**.



Achieved


Financial - Cost Savings

 **TVCC will continue** with efforts to reduce costs through energy conservation by swapping out all light switches in all non-resident rooms for sensors by **Q1 2023**.



Achieved


Quality Improvement

 **To install** 10 Panic Buttons throughout the TVCC facility and exterior by end of **Q2 2023**.



Achieved

Quality Improvement

 **To complete** year 3 of 5 TVCC rooftop replacement units to be completed by **Q2 2023**.



Achieved

Quality Improvement

 **To replace** the front entrance door by **Q3 2023**.



Achieved