

Theme I: Timely and Efficient Transitions

Measure Dimension: Efficient

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Number of ED visits for modified list of ambulatory care-sensitive conditions* per 100 long-term care residents.	P	Rate per 100 residents / LTC home residents	CIHI CCRS, CIHI NACRS / Oct 2021 - Sep 2022	13.56	12.00	5% decrease, the Homew is below the Provincial Ave of 18.5%	NP STAT or NLOTs,

Change Ideas

Change Idea #1 1) Support early recognition of residents at risk for ED visits by providing more tests and treatments in house;2) Maximize use of clinical supports such as Nurse Practitioners Supporting Teams Averting Transfers (NP-STAT) to provide education, training, and clinical guidance on early recognition and treatment to avoid ED visit including communication with residents and families

Methods	Process measures	Target for process measure	Comments
Educate staff with recognizing, assessing, communication via SBAR to MD/NP possible treatment/test and family involvement	1)Avoiding ER Visits training session will be identified and provided to registered staff specifically Falls management, referrals for Xray testing, SBAR communication process, and family communication process	1) All Full and Part time registered staff will complete an Avoiding ER Visits training session by September 30, 2023; 2) 100% of POA's will be provided with educational material for alternatives to ER visits via family council meeting, admission process and newsletter	Progress on the reduction of avoidable ER visits will be shared at the quarterly Resident Council Meeting, Family Council Meeting, Professional Advisory Council meeting and CQI Meeting

Theme II: Service Excellence

Measure Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents who responded positively to the statement: "I can express my opinion without fear of consequences".	P	% / LTC home residents	In house data, interRAI survey / Apr 2022 - Mar 2023	84.85	92.40	Home measures "very satisfied" results and would like to see an increase of 10% for the next survey	

Change Ideas

Change Idea #1 1) Respect resident's values, preferences and expressed needs by: a) Ask questions to residents that cultivate mutual respect and show empathy, b) support residents' councils and work with them to make improvements in the home, c) improve key aspects of daily life that bring residents enjoyment, such as mealtimes, d) learn about and practice active listening towards residents, and e) promote the health and quality of life of long-term care residents by enabling social connections; 2) Educate health care providers on resident-centred care by: a) ensure health care providers are educated on the different attributes of resident-centred care: empowerment, communication, and shared decision-making, b) create relationships and empowering partnerships based on trust, sympathetic presence, and respect, c) incorporate the resident's knowledge, values, beliefs and cultural background into care planning and delivery

Methods	Process measures	Target for process measure	Comments
ERCC education will be utilized to provide education to the front line staff to promote resident satisfaction. The residents "My Wishes" will be a part of every care plan that is applicable as per program.	10% of the front line staff will complete ERCC training in 2023. 100% of the applicable residents will complete the "My Wishes" program with in 30 days of admission in 2023.	10% increase in the percentage of residents who responded positively to the statement: "I can express my opinion without fear of consequences".	Total Surveys Initiated: 99 Total LTCH Beds: 107 Progress on the resident satisfaction action plan will be shared at the quarterly Resident Council Meeting, Family Council Meeting, Professional Advisory Council meeting and CQI Meeting

Theme III: Safe and Effective Care

Measure Dimension: Safe

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment	P	% / LTC home residents	CIHI CCRS / Jul - Sept 2022	18.35	17.00	10% decrease, aiming for Corporate Benchmark of 17.3%	CareRx Pharmacy Consultant, Ontario Shores Centre for Mental Health Sciences (BSO), Psychogeriatrician

Change Ideas

Change Idea #1 1) Collaboration with BSO, MD and pharmacy consultant to review residents that are on antipsychotic medications without associate diagnosis and assess alternative medication or consider use of alternative medication such as naturopathic or cannabis based on the current diagnosis and health conditions

Methods	Process measures	Target for process measure	Comments
Review the data from your home and pharmacy provider indications, new starts, summary of responsive behaviours, interventions and identify residents who may benefit from trialing other alternatives such as cannabis or naturopathic medications	1) the number of residents reviewed by the internal BSO Nurse monthly with follow up assessment done by the MD and pharmacy consultant where alternative medications have been ordered	100% of residents using antipsychotic medication without the supporting diagnosis will be reviewed and assessed by the internal BSO Nurse, followed by a collaborative review by the MD, NP and pharmacy by Dec 31, 2023	Progress on the reduction of residents using antipsychotic medications without the supporting diagnosis will be shared at the quarterly Resident Council Meeting, Family Council Meeting, Professional Advisory Council meeting and CQI Meeting