

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	19.78	18.00	9% reduction below the Ontario Average of 18.5%.	Westminster Imaging, Multi - gen Dental and Optometry services, Happy Feet Foot Services, Achieva Physiotherapy Services, Hawkesbury General Hospital

Change Ideas

Change Idea #1 1) Support early recognition of residents at risk for ED visits; 2) Educate residents and family during admission and resident/family council meeting of reducing ED visits; 3) At admission and updated yearly, discuss end-of-life and do-not-resuscitate (DNR) orders to ensure LTC residents, families, and caregivers are provided education around end-of-life care and that their wishes are documented; 4) Review Advance Care Directives annually with families at care conferences, providing education on hospital transfers and impact on residents.

Methods	Process measures	Target for process measure	Comments
1) All resident and family will be educated during admission and annual care conferences about reduction of ED visit such as UTI, Pneumonia, and Dehydration by DOC Bridget and/or delegate. Palliative Care measures will also be discussed during this meeting; 2) Annual Care Conference review of resident Care Directive status and education with family and residents on potential impacts of transfer.	1) 100% of Care directives will be reviewed annually during care conferences by the end of 2023; 2) # of residents who are provided in education of reduction of ED visit during admission and annual care conferences.	80% new admission and annual care conferences education provided	

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".	C	% / LTC home residents	In-house survey / 2021	100.00	100.00	Above than the Overall LTC Homes in 2021	Alzheimer Society of Ontario

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 and b) support residents' councils and work with them to make improvements in the home

Methods	Process measures	Target for process measure	Comments
1) Establish a therapeutic relationship with residents to build a genuine trusting and respectful partnership'	1) Increase in resident satisfaction response on annual satisfaction survey	1)100% of staff Surge learning completion;	

Change Idea #2 2) Educate health care providers on resident-centred care on the different attributes of resident-centred care: empowerment, communication, and shared decision-making;

Methods	Process measures	Target for process measure	Comments
2) Ensure staff are provided the Customer Service education during orientation and Annually;	2) # of staff educated on Customer Service;	2) 80% of staff received education for Customer Service	

Change Idea #3 3)Increase training and promote residents Bill of Rights

Methods	Process measures	Target for process measure	Comments
3) Live education - Review the new residents Bill of rights at daily huddles with staff in attendance. On-line education - annual Surge learning course; Encourage different avenues of communication and expression, for example residents' council, report to charge nurse or departmental manager.	3) # of staff completed the Resident Bill of rights Surge education	3) Improved resident and POA experience, decreased concerns/complaints.	

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	30.49	25.00	25% for the year until the Home reach the Corporate target of 17.3%	CareRx Pharmacy Consultant, Psychogeriatrician

Change Ideas

Change Idea #1 1) Collaboration with BSO, MD, NP and pharmacy consultant to review MDS Outcome scores (CPS, ABS, and Pain) to review and assess alternative medication based on current diagnosis and health condition; 2) Collaboration with MD, NP and pharmacy consultant to discuss and consider use of alternative medication such as naturopathic or cannabis based on the current diagnosis and health conditions of residents using antipsychotic medication without the supporting diagnosis; 3) Education on documentation of responsive behaviours such as hallucination and delusion.

Methods	Process measures	Target for process measure	Comments
1) Review and verify the data from your home on the number of residents prescribed antipsychotics, including new starts, prns, and administration rates; 2) during scheduled monthly BSO rounds, BSO nurse will review 3 residents each month to assess for changes in cognition, responsive behaviours and pain over the last 3 months; 3) Changes to medications will be communicated to the nurse to assess and evaluate the resident's response to the medication reduction; 4) Identify residents using antipsychotic medications who could potentially use alternative medications	1) the number of residents reviewed by the internal BSO Nurse monthly with follow up assessment done by the MD, NP and pharmacy; 2) the number of residents reviewed by the internal BSO Lead with an assessment done by the MD, NP and Pharmacy consultant where alternative medications have been ordered	1) 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; 2) 50% Residents identified as potential candidates for using alternative medications will be reviewed and assessed by the BSO Lead, with further assessment completed by the MD, NP and pharmacy consultant 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