

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	9.30	8.50	The Home is looking into new and different technology ideas that could be used in the home to reduce current performance.	

Change Ideas

Change Idea #1 Increased use of new and innovative diagnostic equipment in the Home could help to reduce current performance. Updates to be collected by the RAI co-ordinator regarding reasons for ED visits. Look at admission after ED visit also. Review findings with Director of Care, Charge Nurse and monitor reasons.

Methods	Process measures	Target for process measure	Comments
On going monthly analysis to be kept and shared with care team. Strategy to be discussed, trialed and then reviewed again.	Number of monthly reports reviewed for the next 12 months.	100% of the monthly reports regarding ED visits, to be reviewed and analyzed.	

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 responding positively to: "What number would you use to rate how well the staff listen to you?"	P	% / LTC home residents	In house data, NHCAPHS survey / Apr 2022 - Mar 2023	CB	CB	Target is to have all residents have a survey completed so the Home is able to address any possible concerns.	

Change Ideas

Change Idea #1 To have residents complete annual satisfaction surveys. Residents who need assistance to complete and understand the questions is to receive assistance from the person assisting them with the survey.

Methods	Process measures	Target for process measure	Comments
By having all of the residents complete the question. For the past year just under 50% of those asked to fill out the survey, actually did. This issue is to be discussed further and assistance given to the residents.	By the number of surveys that are actually completed.	To have 75% of the residents fill out the survey.	

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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	18.88	17.00	To ensure that residents are receiving the appropriate medication for their diagnosis.	

Change Ideas

Change Idea #1 To have the nursing leadership team along with the BSO Lead, review all the resident charts who are receiving antipsychotic medication.

Methods	Process measures	Target for process measure	Comments
Review information collected. Where needed have the Medical Director involved for discussion and possible medication changes.	To decrease the number of residents without a diagnosis of psychosis who are receiving antipsychotic medication.	Target reflects local LHIN data along with provincial average of 19.3% and Canadian average of 22%. Current performance if below these averages.	