

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 / October 2020 - September 2021	X	6.00	To maintain the ED visit rate at 0.0 - 6.0%	

Change Ideas

Change Idea #1 Early recognition and prevention

Methods	Process measures	Target for process measure	Comments
PSWs -Ensure using "Stop and Watch" program within POC when they see acute or significant change in residents' health condition Registered Nurses - Capturing early and assessing immediately when notice any new or worsened developing conditions and notify DOC and NP or physician ADOC/DOC - Reading progress notes daily to capture any new or developing medical conditions need immediate attention and developing a plan of care to avoid ED visits	# of residents progress notes and POC documentations been audited by ADOC/DOC related to transferring to ED # of residents returning from ED visits had debriefing	100% of residents transferred to ED will have all captured acute or worsening conditions and necessary documentations entered in PCC / POC 100% of residents transferred to ED will have debriefing session with registered staff/PSWs returned from ED by ADOC/DOC within 24-72 hours	

Change Idea #2 Collaborative and shared model of care which involves staff, consulting partners in providing health care to residents

Methods	Process measures	Target for process measure	Comments
Identify acute change of resident condition Continue to implement evidence based best practices Facilitate referral NP, BSO, and geriatric psychiatry & geriatric medicine consultation (Scarborough Health Network)	% of residents transferred to ED been identified that are at risk of ED visit and referred to Health Care Partners	100% of residents transferred to ED will be captured early and been referred to health care partners prior to avoid ED transfer by registered staff by July 31, 2022	

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 / April 2021 - March 2022	66.67	90.00	The Home collects this data using the Inter-RAI satisfaction survey	

Change Ideas

Change Idea #1 Process improvement: Increase involvement in Resident/POA input into care planning

Methods	Process measures	Target for process measure	Comments
- Multidisciplinary team staff to communicate the residents/POAs regarding the care and services been given, any pros and cons. - Nursing staff to review the care plan with Resident/POA with any change in medical condition and treatment plans to recruit more Resident focused interventions for care planning	Percentage of Residents who responded positively	The target is to increase our 100% satisfaction rating.	Total Surveys Initiated: 3 Total LTCH Beds: 30 Increased resident involvement in care planning will increase satisfaction rating when residents have an increased voice into care planning

Measure **Dimension:** Patient-centred

Indicator #3	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 / April 2021 - March 2022	100.00	100.00	To maintain the residents satisfaction at 100%	

Change Ideas

Change Idea #1 Process improvement: Increase involvement in Resident/POA input into care planning

Methods	Process measures	Target for process measure	Comments
- Multidisciplinary team staff to communicate the residents/POAs regarding the care and services been given, any pros and cons. - Nursing staff to review the care plan with Resident/POA with any change in medical condition and treatment plans to recruit more Resident focused interventions for care planning	Percentage of Residents who would recommend this home	The target is to maintain our 100% satisfaction rating	Total Surveys Initiated: 3 Total LTCH Beds: 30 Increased resident involvement in care planning will increase satisfaction rating when residents have an increased voice into care planning

Theme III: Safe and Effective Care

Measure	Dimension: Safe							
Indicator #4	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 / July - September 2021	19.82	18.00	To decrease antipsychotic use by 9.18%		

Change Ideas

Change Idea #1 Each resident admitted with antipsychotic medications will be assessed for new or worsening responsive behaviours and possible causes and diagnoses will be reviewed.

Methods	Process measures	Target for process measure	Comments
- BSO nurse will assess and collaborate with external partners such as GMHOT, and Geriatric Psychiatrist from SHN - BSO nurse will track medication data, assess residents on a person-by-person basis, and engage/discuss with families.	Residents using antipsychotic medications will be reviewed on admission, quarterly and during significant change	100% of residents using antipsychotic medications will be reviewed.	