

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	13.77	10.00	Number of unplanned ED visits	

Change Ideas

Change Idea #1 Reinforced through training and testing of Nurse Leaders to ensure levels of professional competency and efficiency with the tools.

Methods	Process measures	Target for process measure	Comments
Provide training to Nurses	No of Nurses/RPN who demonstrate participation in training	Reduce the number of unplanned ED transfer by 20% by end of December	

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, NHCAHPS survey / Apr 2022 - Mar 2023	68.18	80.00	To improve the response of residents to the question how well the staff listen to them	

Change Ideas

Change Idea #1 resident council as a way to participate and share their concerns. Introduce the Tenera system as an effective way of communication between residents and healthcare providers

Methods	Process measures	Target for process measure	Comments
Resident council monthly meetings Residents can raise their concerns on the resident council	Resident survey feedback	To improve resident how well the staff listens to them to be 80% by December,2023	Total Surveys Initiated: 100 Total LTCH Beds: 254

Change Idea #2 Resident council meeting on a monthly basis

Methods	Process measures	Target for process measure	Comments
Track The no of the resident council held per month/year and the no of residents who attend the monthly council meeting	No residents who are attending the resident council meeting No of resident council meeting per month/year	100% monthly council meeting at least 5% of residents attend the council meeting	The goal is to improve the safety and satisfaction of the residents.

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 / Apr 2022 - Mar 2023	60.00	80.00	Increase the resident number who feel that they can express their opinions without fear of consequences	

Change Ideas

Change Idea #1 encourage the residents to express their concerns, working on finding an action plan to satisfy them.

Methods	Process measures	Target for process measure	Comments
1)Concern, Complaints Policy and Procedure is updated 2022. 2)Respond in a timely manner to the resident/family concerns 3)Open office strategy of all managers, supervisors and directors	No concerns/complaints were received by the resident/family feedback from Resident council/family council survey feedback back	To improve the resident satisfaction to reach 80%	Total Surveys Initiated: 100 Total LTCH Beds: 245

Change Idea #2 Increase the number of residents who participate in the annual survey

Methods	Process measures	Target for process measure	Comments
Review and revise current survey with the Corporate Quality Committee annually. Continue to conduct the survey annually encouraging all residents to participate. Utilize staff and students for data collection where appropriate.	To have 80% of residents participate in the annual survey	Total number of participants over the total number of residents population.	

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 / Jul - Sept 2022	24.81	18.00	Reduce the number of residents without psychosis who is given antipsychotic medications	

Change Ideas

Change Idea #1)Move forward with ensuring that residents who are on antipsychotic medication, have a diagnosis to support this

Methods	Process measures	Target for process measure	Comments
ensure that the physician provides the diagnosis to the MAR for residents taking antipsychotic medications Ask the physicians to revise the residents' antipsychotic medications every six months	Continue auditing the MAR to insure the diagnosis is already written for antipsychotic medications. Provide the list of residents who are on antipsychotics for physicians to revise their medications on regular basis.	Reduce the number of residents without psychosis who are given antipsychotic medications to be 18% by December,2023	

Change Idea #2 Provide education to the registered nurses on the antipsychotic medications

Methods	Process measures	Target for process measure	Comments
Education training provided in the nursing meetings to registered nurses	percentage of registered nurses who receive antipsychotic education	100% of nurses receive education on anti psychotic medication	