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	14.93	14.50	Exceeded our 15% improvement from 2019. Looking to have maintain current performance and/or a 2.9% improvement, with a focus on the continued improvement strategies in place.	

Change Ideas

Change Idea #1	Review of ER transfers that were the result of one of the ambulatory care-sensitive conditions to identify the processes and decisions that were involved that resulted in an ER transfer. The goal to result in process changes that will result in the home being proactive rather than reactive.

Methods	Process measures	Target for process measure	Comments
Review of the cases that the home can identify. Implement the electronic monitoring system for ER transfers in the EHR.	The number of ER transfers that are reviewed where the transfer was for one of the ambulatory care-sensitive conditions.	100 percent of the ER transfers used in the calculation of this indicator will be reviewed by a dedicated team.	

Change Idea #2	Review of ER transfers that were the result of one of the ambulatory care-sensitive conditions to identify the processes and decisions that were involved that resulted in an ER transfer. The goal to result in process changes that will result in the home being proactive rather than reactive.

Methods	Process measures	Target for process measure	Comments
Review of the cases that the home can identify. Implement the electronic monitoring system for ER transfers in the EHR.	The number of ER transfers that are reviewed where the transfer was for one of the ambulatory care-sensitive conditions.	100 percent of the ER transfers used in the calculation of this indicator will be reviewed by a dedicated team.	

Change Idea #3   Implement and execute POET (Prevention of Error Based Transfers) provincial program

Methods	Process measures	Target for process measure	Comments
Working with McMaster University - Central West LHIN project implementation team	Education and training of the program nursing staff. Code Status elements implemented Resident Wishes for care implemented	Education and training of the program for 100% nursing staff. 100% of resident records reviewed and 60% adoption of Code Status elements, and Resident Wishes for care	

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 / April 2021 - March 2022	CB	CB	Resident and Family Survey has not previously included this indicator. However, On the 2021 Survey 76.9% responded the Home exceeded or Met expectations for " I am comfortable to ask for assistance from staff when I need it"	

Change Ideas

Change Idea #1   Adopt the question from the interRAI survey tool into the resident satisfaction survey

Methods	Process measures	Target for process measure	Comments
The home will adopt the question and the response matrix from the interRAI survey tool into the resident satisfaction survey for 2022	All residents will be given the opportunity to respond to this question	100% of residents will provide a response to this question	

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	CB	CB	Resident and Family Satisfaction Questionnaire has not previously included this question.	

Change Ideas

Change Idea #1 Adoption of the question in the 2022 Resident and Family Questionnaire.

Methods	Process measures	Target for process measure	Comments
The home will adopt the question and the response matrix from the interRAI survey tool into the resident satisfaction survey for 2022	All residents will be given the opportunity to respond to this question	100% of residents will provide a response to this question.	

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	26.51	22.50	Goal to reduce Antipsychotic medication utilization by 15%	

Change Ideas

Change Idea #1 Developing the Butterfly Model of Care

Methods	Process measures	Target for process measure	Comments
Working with Dementia Care Matters the home will be implementing the Butterfly Model of Care	Designation as a Butterfly Home by Dementia Care Matters	Certification by Dementia Care Matters	

Change Idea #2 Work with the pharmacy and physicians that serve their homes to ensure that residents using anti-psychotic medications have a medical diagnosis and reasons for use is identified.

Methods	Process measures	Target for process measure	Comments
Regular reviews of those residents that are on anti-psychotic medications to ensure that they have a medical diagnosis and reason for it's use is documented.	Regular audits of charts for those residents we know are on anti-psychotic medications	100% review of resident charts that are on anti-psychotic medications	

Change Idea #3 Adopt an interdisciplinary approach and utilize our community resources effectively

Methods	Process measures	Target for process measure	Comments
Review other ways to reduce behaviours that are not related to medication and assess how we are implementing them. Ensure these are part of the educations program.	The home has adopted an internal Behaviour Support Team. Utilization of the team to assist in the identification and management of decreasing medication with the interdisciplinary team.	The home will have a performance improvement change of 15% residents taking antipsychotic medication.	