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	20.29	15.20	Reduce potentially avoidable emergency department visits for long-term care residents	NPSTAT

Change Ideas

Change Idea #1   1. Staff education on health assessment & SBAR communication

Methods	Process measures	Target for process measure	Comments
1. Review tracker to identify any gaps such as time of day, diagnosis, process for potential in house treatment, early detection, equipment 2. educate all registered staff on health Assessment and SBAR communication	1. the # of education provided to the staff regarding ED visits 2. the # of registered staff that attended the SBAR communication	90% of registered staff who attended education by end of December 2023	

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	86.90	Above the overall LTC survey result	LTC Extendicare Nursing Consultant

Change Ideas

Change Idea #1   1)Educate the staff on Residents Bill of rights and Zero Tolerance of Abuse and Neglect Policy

Methods	Process measures	Target for process measure	Comments
1.Staff will be educated on residents bill of Rights and Zero Tolerance of Abuse and Neglect Policy	the # of staff attended the education	100% of staff Educated by end of December 2023	

Change Idea #2   2) Initiate "All About Me" program in the home

Methods	Process measures	Target for process measure	Comments
1) Train the nursing departments 2) review with resident and family council	1) # of Staff trained on the "All About Me "assessment 2) number of residents/families participated in "All About Me" assessment 3) number of times program is discussed at resident council and family council	60% of new admissions will have a "All About Me" assessment completed	

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	19.20	17.00	meet Corporate benchmark of 17.3%	1. LTC Nursing Consultant 2.NPSTAT 3. PASE 4. Pharmacy Consultant

Change Ideas

Change Idea #1 1) Review with Interdisciplinary Team residents with antipsychotic medication without dx for alternatives

Methods	Process measures	Target for process measure	Comments
1) educate staff on the use of deprescribing algorithm. 2) BSO lead uses tracking tool of all residents taking an antipsychotic, tracks diagnosis, dose, behavior. 3) review Quality Indicator tool at our Monthly meetings with antipsychotic de-prescribing team which includes BSO team recommendation; 4) Educate registered staff on the risk of using antipsychotics medications.	1) # of staff educated on use of de-prescribing algorithm 2) # of registered staff educated on risks of antipsychotic use. 3) # of residents reviewed with changes made to plan of care	1) 90% of staff will be educated on the algorithm and the risks associated with use of antipsychotic 2) 100% of the triggered residents will be reviewed	The Home is collaborating with the interdisciplinary team, Pharmacist and Medical Doctors with the appropriate intervention and de-prescribing of antipsychotic medication that will have less impact for our residents