

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	16.67	15.00	To work towards provincial average.	

Change Ideas

Change Idea #1 Increase Registered staff skill set, Increase our Nurse Practitioner visits Hire mixed skill staff LTC/Acute nurses

Methods	Process measures	Target for process measure	Comments
Educating nursing staff on physical assessment skills Encourage confidence in communicating with MRPS and on call Doctors through in-service and workshops.	Number of registered staff that will be educated.	100% of all registered staff will all be educated on assessment skills with proficiency and confidence.	

Change Idea #2 1)Educate staff and residents on safe transfers and mobility. 2)Increasing our OT and PT involvement in the home.

Methods	Process measures	Target for process measure	Comments
Have the OT and PT complete in-service education for all staff and residents on transfer and mobility.	1)Number of staff and residents that will attend the in service. 2)number of clients the PT and OT have in the home.	1)100% of staff and residents will attended the in service. 2)OT and PT will increase their client list to assist in the home by 5%	

Change Idea #3 Fall committee team schedule education on safe transfers,4p's and hourly rounding.

Methods	Process measures	Target for process measure	Comments
In-Service will be held on the use of 4 P's and hourly rounding for all staff.	Number of staff that will have additional education on falls prevention.	100% of staff will be educated on Falls prevention	

Theme II: Service Excellence

Measure Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident experience: Percentage of residents who responded positively to the statement "I can express my own opinion without fear of consequences by the front-line staff and leadership".	C	% / Other	In house data, NHCAPHS survey / January 2022 - December 2022	93.80	100.00	To work towards previous years goals of 100%.	

Change Ideas

Change Idea #1 Resident council will provide residents additional education about our whistleblower policy as a standing item on their monthly agenda.

Methods	Process measures	Target for process measure	Comments
A standing agenda item will be added to the resident council monthly meeting to ask whether residents have any questions around the whistle blower policy and understand their right.	Number of residents that agree they are knowledgeable on where to find the information in the home.	100% of residents will be educated on the whistle blower hotline. 100% of capable residents will be knowledgeable as to where to locate whistleblower information within the home.	

Change Idea #2 Resident council meeting will have open format for residents to express their opinions or fears.

Methods	Process measures	Target for process measure	Comments
Resident satisfaction survey number will be reviewed and discussed at Quality meetings. Review of suggestions with realistic goals	Number of residents who agree they can express themselves freely in their resident council meeting.	100% of residents will agree with the above statement.	

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	9.90	9.00	decrease by .9 to assist in lowering the overall average for Southbridge Care Homes. Current performance already well below corporate average.	

Change Ideas

Change Idea #1 Review all antipsychotics with pharmacist/MRP and Registered staff to ensure residents are at the lowest dose.

Methods	Process measures	Target for process measure	Comments
Involve BSO and Social worker to assist with monitoring and tracking behaviors. Monitor tracking methods while on reduction program	Number of residents on tracker with completed CMAI and if scores below 50 were referred to MD/NP for trial reduction.	100% of staff will be educated on antipsychotics and the reeducation program criteria	

Change Idea #2 Monitor admission medication when transferred from acute hospital settings.

Methods	Process measures	Target for process measure	Comments
Nurse on staff will ensure all new medications are verified by the residents MRP.	number of return residents from acute hospital settings that will have their	100% of residents returning from hospital will have their medications reviewed	