

Access and Flow

Measure - Dimension: Efficient

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Rate of ED visits for modified list of ambulatory care–sensitive conditions* per 100 long-term care residents.	O	Rate per 100 residents / LTC home residents	CIHI CCRS, CIHI NACRS / Oct 1, 2023, to Sep 30, 2024 (Q3 to the end of the following Q2)	20.93	17.00	We are continuing to partner with our OHT, NLOT and community partners to provide residents with in house care with a focus to reduce ED visits. IN house NP provides GOC discussions early to help reduce ED visits and provide family support	

Change Ideas

Change Idea #1 The home will utilize NLOT partners to assist with training of staff on critical and knowledge skills to mitigate ED visits

Methods	Process measures	Target for process measure	Comments
Quarterly meetings with NLOT (or as needed) to discuss training opportunities, support needed and family GOC	# of residents transferred to hospital	Decrease # of ED visits with goal of reaching 17% from 23%	

Change Idea #2 Increase Registered Staff clinical skills.

Methods	Process measures	Target for process measure	Comments
Provide opportunities for registered staff to attend training to further enhance their clinical skills (i.e., IV therapy, Leadership, etc.)	% of registered staff that participate in clinical skill development.	50% of full time Registered staff will attend at least one educational opportunity that advances their clinical skills.	

Experience

Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident satisfaction is related to pleasurable dining	C	Rate / LTC home residents	In house data collection / Jan - Dec 2025	65.00	70.00	Increase resident satisfaction with relation to dining room service and atmosphere	

Change Ideas

Change Idea #1 Increase themed dining and resident choices for menu with the input of resident council and food committee

Methods	Process measures	Target for process measure	Comments
Active Food committee meetings held in order to gain ideas, suggestions and themes	% of resident satisfaction on Resident Annual Survey	At least one themed dining experience to be hosted per month	

Change Idea #2 Consistent Table Settings.

Methods	Process measures	Target for process measure	Comments
Consistent table setting expectations to be determined by corporate. Education will be provided to the dietary team. Leadership team to review for consistency.	All tables will be set following standard table setting as determined by corporate.	100% Consistency at all meals in all dining rooms.	

Change Idea #3 Pleasurable Dining Education

Methods	Process measures	Target for process measure	Comments
Continue to offer education to all team members on pleasurable dining.	# of staff trained.	All staff will receive pleasurable dining education.	Staff received education in 2024 but will continue to ensure new staff have education and will build out specific concepts at team ups that support pleasurable dining.

Safety

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	O	% / LTC home residents	CIHI CCRS / July 1 to Sep 30, 2024 (Q2), as target quarter of rolling 4-quarter average	9.30	8.00	The reduction or discontinuation of antipsychotics is a process for the NP and MD to work together on- this will take time as it will be done slowly- we would like to see the results through all four quarters of data.	

Change Ideas

Change Idea #1 Multidisciplinary review of antipsychotics being used by residents

Methods	Process measures	Target for process measure	Comments
NP to review resident medication upon admission and work closely each month with MD, Pharmacy to put a plan in place to reduce usage as able for all residents prescribed antipsychotics	# of residents reviewed monthly	All residents receiving antipsychotic's will be reviewed monthly	

Change Idea #2 2) Review psychotropic usage for new residents moving in.

Methods	Process measures	Target for process measure	Comments
Each resident moving in on psychotropics will have a comprehensive review to determine reason that medication was ordered by physician, NP, Pharmacist and BSO lead. Diagnosis will be indicated. Where no appropriate diagnosis, team will work to discontinue medication as appropriate.	% of residents who will have a comprehensive review of psychotropic drug usage.	100% of residents will be reviewed.	High number of residents moving into the home with psychotropic drug prescriptions and personal expressions.