

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	36.11	25.00	to work towards provincial average.	

Change Ideas

Change Idea #1 Implement goals of care discussion with families within 3-6 months of admission

Methods	Process measures	Target for process measure	Comments
Explore resident's and family's illness understanding. Give information as necessary. Assist resident and their families to develop goals of care Work with resident and families to develop a plan to meet their goals. Document plan goals in PCC where all staff can view	# of goals of care discussions each month	100% of residents and families will be informed of their illness, have their goals expressed and have a plan in place	

Change Idea #2 Review of hospital transfers will be done monthly.

Methods	Process measures	Target for process measure	Comments
Review of hospital transfers monthly to identify trends and provision of staff education as necessary	# of Registered Staff education completed on policies and topics related to preventing avoidable transfers to hospital	100% of transfers will be reviewed and discussed at registered staff meetings with education provided as required	

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 that responded positively to the statement "I can express my opinion without fear of consequences from the staff or leadership"	C	% / Other	In house data, InterRAI survey, NHCAPHS survey / January 2022 - December 2022	CB	CB	To work towards to 2020 percentage of 100%.	

Change Ideas

Change Idea #1 Resident education on abuse and neglect and the process for filing a concern

Methods	Process measures	Target for process measure	Comments
Education provided to residents by Program Manager at Resident's Council and independent meetings with residents who choose not to attend Council meetings and upon admission.	# of residents educated	100% of residents will be educated	

Change Idea #2 New standing agenda item at Resident's Council.

Methods	Process measures	Target for process measure	Comments
Residents will be asked at each meeting to share opinions and reminded that it is a safe space with no consequences.	# of meetings where residents expressed themselves and/or demonstrate awareness of ability to do so.	Residents acknowledge at 100% of meetings awareness of option to express opinions	

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	15.69	14.00	To reduce the current performance by 1.7% to reduce the overall average of southbridge home antipsychotic use.	

Change Ideas

Change Idea #1 Tailored recreation program for residents participating in antipsychotic reduction program

Methods	Process measures	Target for process measure	Comments
Recreation staff will communicate with resident families to develop a plan of recreation activities based on resident interests and abilities.	# of residents with tailored recreation program created	100% of residents participating in antipsychotic reduction program will have a tailored recreation program	

Change Idea #2 Review antipsychotics for efficacy and possible decrease/discontinuation.

Methods	Process measures	Target for process measure	Comments
Review 3 weeks and then every 3 months thereafter DOS Map 2 weeks initiation Antipsychotic monitoring tasks post 2 weeks of initiation	# of residents reviewed every 3 months	All residents on antipsychotics will be reviewed every 3 months	