# **Theme I: Timely and Efficient Transitions**

Measure Dimension: Efficient

Indicator #1	Туре	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.	Р	Rate per 100 residents / LTC home residents	CIHI CCRS, CIHI NACRS / Oct 2021 - Sep 2022	Х	17.00	Collecting data for new home, aim to be under the provincial average.	

## **Change Ideas**

Change Idea #1 The home to assess the resident's code status on a quarterly basis or as needed.

Methods	Process measures	Target for process measure	Comments
Conduct an interdisciplinary meeting (RAP meetings) to discuss the resident's goal of care with the resident or power of attorney. Ensure any changes discussed are communicated and followed up with the front-line staff.	number of code status reviewed on a quarterly basis or as needed by the interdisciplinary team members.	The home will review 100% of residents code status each quarter.	

#### Theme II: Service Excellence

Measure Dimension: Patient-centred

Indicator #2	Туре	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".	Р	% / LTC home residents	In house data, interRAI survey / Apr 2022 - Mar 2023	СВ	СВ	Collecting data for new home, results from 2022 survey will be for two separate homes but the interventions remain true for the new LTC building.	

### **Change Ideas**

Change Idea #1 Review whistle blower policy at resident council meetings each month

Methods Process measures Target for process measure Comments

standing agenda to be added to meeting the number of meetings where residents 100% of meetings will discuss the to ensure residents have the opportunity discussed the whistle blower policy. whistle blower policy.

to discuss whistle blower policy at each meeting to gain better understanding

### Theme III: Safe and Effective Care

<b>IVIEASURE</b> Dimension: Safe							
Indicator #3	Туре	•	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	Р		CIHI CCRS / Jul - Sept 2022	8.33	8.33	goal is to maintain current rate throughout the process of expanding the home to 160 residents. Current rate is reflective of previous home.	

## **Change Ideas**

Change Idea #1 review of all residents prescribed PRN antipsychotics to ensure they have alternative interventions in their care plan to reduce the need for their PRN
and discuss medication being discontinued if appropriate.

Methods	Process measures	Target for process measure	Comments
Each resident will have care plan reviewed quarterly for resident specific interventions and to have their PRN antipsychotic discontinued.	% of residents prescribed PRN antipsychotics that have resident centered interventions in place	100% of residents prescribed PRN antipsychotics that have resident centered interventions in place	

### Change Idea #2 Verify the data on the number of residents prescribed antipsychotics, including new starts, prns, and administration rates

Methods	Process measures	Target for process measure	Comments
collaborate with pharmacy consultant to determine data	number of new and updated statistics to review	the home will obtain 3 reports (admin rates, PRNS, new starts) at next quarterly MAC meeting	