

## 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	7.69	7.00	Below Provincial Average of 18.5%	Medical Resident Doctors

### Change Ideas

Change Idea #1 1) Provide preventative care and early treatment for common conditions leading to potentially avoidable ED visits by maximizing the use of of the current medical doctor

Methods	Process measures	Target for process measure	Comments
Registered staff to assess resident condition and communicate using SBAR to the MD	1) percentage of staff who assessed and used the SBAR method in communicating resident potential transfer; 2) increase use of MD in making the decision about a transfer; 3)	100% of Registered Nurses will use the SBAR method in communicating with MD	

Change Idea #2 2) Registered nurses to receive education, training, and clinical guidance on early recognition and treatment from MD

Methods	Process measures	Target for process measure	Comments
MD will educate Registered Staff on when they can call for support to avoid ER visits	# of registered staff attended the MD education	80% of registered staff will receive education from MD	

Change Idea #3 3) At admission and updated yearly, discuss end-of-life and do-not-resuscitate (DNR) orders to ensure LTC residents, families, and caregivers are provided education around end-of-life care and that their wishes are documented.

Methods	Process measures	Target for process measure	Comments
Annual Care Conference review of resident DNR status and education with family and residents on potential impacts of transfer	# of care conferences where end of life wishes and DNR status are reviewed.	100 % of residents' end of life wishes and DNR status will be reviewed annually during care conferences by Dec 31, 2023	

Change Idea #4 Educate registered staff on CHES score which detects frailty and health instability and was designed to identify residents at risk of serious decline, thereby intervening sooner to prevent transfer to hospital.

Methods	Process measures	Target for process measure	Comments
RAI coordinator to review with registered staff the value of reviewing outcome scores, including the CHES score.	# of registered staff educated on outcome scores.	Full time registered staff will be educated on CHES scores and review quarterly or when there is a significant change in status.	

## 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	% / Adult long stay home care clients	In-house survey / 2021	100.00	100.00	Above than the Overall LTC Homes in 2021	BSO-BSL, Seniors Mental Health Services, Lutherine Community Living, BISNO

### Change Ideas

Change Idea #1 1) Residents will feel they can express themselves without fear of consequences related to improved relationships with staff as a result of staff education on therapeutic relationships and boundaries; 2) Respect resident's values, preferences and expressed needs by: a) Ask questions to residents that cultivate mutual respect and show empathy, b) support residents' councils and work with them to make improvements in the home, c) improve key aspects of daily life that bring residents enjoyment, such as mealtimes, d) learn about and practice active listening towards residents, and e) promote the health and quality of life of long-term care residents by enabling social connections; 3) Educate health care providers on resident-centred care by: a) ensure health care providers are educated on the different attributes of resident-centred care: empowerment, communication, and shared decision-making, b) create relationships and empowering partnerships based on trust, sympathetic presence, and respect, c) incorporate the resident's knowledge, values, beliefs and cultural background into care planning and delivery

Methods	Process measures	Target for process measure	Comments
1) Include as a standing agenda item on Resident Council's meetings monthly - Resident Bill of Rights. More awareness of posting in the home, through education, and their understanding of same. Random questionnaire of staff re: "Professional boundaries and Therapeutic relationships"	1) Number of staff who were questioned and understood the Professional boundaries and Therapeutic Relationships; 2) # of staff trained in therapeutic relationship	1) 100% of staff will be trained in therapeutic relationship by of Dec 31, 2023	

## 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	1.58	8.00	Below Corporate Benchmark of 17.3%	CareRx Pharmacy, Ontario Shores Centre for Mental Health Sciences (BSO), Psychogeriatrician, BSO-BSL, Seniors Mental Health Services, Lutherine Community Living, BISNO, Social Worker

### Change Ideas

Change Idea #1 Collaboration with BSO, MD, and pharmacy consultant to review MDS Outcome scores (CPS, ABS, and Pain) quarterly for residents on antipsychotics.

Methods	Process measures	Target for process measure	Comments
Review the outcome scores at quarterly multidisciplinary medication reviews along with summaries of resident recent behaviours. Identify resident cohort for antipsychotic reduction. Identify residents using antipsychotic medications who could potentially use alternative medications	# of residents on antipsychotics reviewed quarterly	All residents on antipsychotics will have their outcome scores reviewed by BSO, MD and pharmacy consultant at least quarterly with adjustment to medication as appropriate.	Progress on the reduction of residents using antipsychotic medications will be shared at the quarterly Resident Council Meeting, Family Council Meeting, Professional Advisory Council meeting and CQI Meeting

**Change Idea #2** Residents admitted on antipsychotics will be reviewed at their admission care conference with interdisciplinary team and the resident and their family to determine possible adjustments.

Methods	Process measures	Target for process measure	Comments
1. Pharmacy consultant to be involved in the review of newly admitted residents on antipsychotics without diagnosis by the time of the admission care conference. 2. complete a Cohen-Mansfield prior to determining eligibility for adjustment to medication. 3) If appropriate, MD and Pharmacy consultant will make recommendations for tapering antipsychotics;	The number of residents reviewed by the internal BSO Lead with an assessment done by the MD and Pharmacy consultant where alternative medications have been ordered. # of Cohen Mansfield assessments completed each month.	All new residents admitted on antipsychotics will have their medication reviewed by Pharmacy consultant and MD at all admission care conferences in 2023.	

**Change Idea #3** Collaboration with MD and pharmacy consultant to discuss and consider use of alternative medication such as cannabis based on the current diagnosis and health conditions of residents using antipsychotic medication.

Methods	Process measures	Target for process measure	Comments
Residents identified as potential candidates for using alternative medications will be reviewed and assessed by the BSO Lead, with further assessment completed by the MD and pharmacy consultant by Dec 31, 2023	# of BSO consultations, # of residents receiving an alternative to antipsychotic such as cannabis	All appropriate residents on antipsychotics will be reviewed by BSO, MD and Pharmacy consultant by December 2023.	

**Change Idea #4** Improve medication review process by using a team approach to quarterly medication reviews for those on antipsychotics, involving physicians, pharmacist, and nurses.

Methods	Process measures	Target for process measure	Comments
Meetings will be set up to with each home area, MD, Pharmacy consultant to review medication reviews due the following month.	# of meetings held with MD, Pharmacy consultant and registered staff to review upcoming quarterly reviews.	All residents on antipsychotics who have their quarterly medication review done in collaboration with MD, Pharmacy consultant and registered staff by December 2023.	