

Access and Flow

Measure - Dimension: Timely

Indicator #1	Type	Unit / Population	Source/ Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of completed referral reviews within 36 hours during business days (Monday – Friday) normal work week.	C	# of Community palliative clients and Hospital patients with a Palliative Performance Scale (PPS) of ≤30%.	April 1, 2024 - December 31, 2024	Collecting Baseline	92.00	Currently, there are no standards for provincial hospices. This target will be the internal baseline based on Yee Hong's 10 bed hospice average.	Hospitals and Community (Palliative Care Physicians, Family Physicians, Home and Community Care Support Services (HCCSS), NP, etc.).

Change Ideas

Change Idea #1 Ensure back-up support trained and available to track referrals and complete referral review process.

Methods	Process measures	Target for process measure	Comments
1. Train a back-up resource (Intake Coordinator and/or Social Worker).	a. Number of back-up resources trained.	a. One (1) back up resource will be trained by December 31, 2024.	Quality dimension may not be met due to admission preparation, completion of intake assessments for rushed admissions, number of staff on site (i.e., weekend, vacation).
2. Utilize an excel spreadsheet specific for referral tracking (indication of referral date, first contact, resident name, diagnosis, PPS score, etc.).	b. A tracking excel spreadsheet created.	b. A new tracking excel spreadsheet will be implemented by December 31, 2024.	

Change Idea #2 Increase awareness for incoming referral faxes.

Methods	Process measures	Target for process measure	Comments
Create a new process for receiving incoming faxes.	A new process created to monitor and login to receive incoming faxes via Infoanywhere.	By December 31, 2024, a new incoming fax process will be implemented and monitored at least three (3) times daily.	<i>Please see above.</i>

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source/ Period	Current Performance	Target	Target Justification	External Collaborators
At least 95% satisfaction rate.	C	Number of hospice residents admitted for at least 72 hours (completed by family and residents combined).	April 1, 2024 - December 31, 2024	97.00	98.00	To maintain high satisfaction levels for resident and family member experience.	

Change Ideas

Change Idea #1 Emphasize person centered-care approach to manage pain and symptoms effectively.

Methods	Process measures	Target for process measure	Comments
1. Provide refresher education offered by interprofessional teams (Palliative Care Physician, Pharmacist, LTC Nurse Practitioner and Certified Palliative Care RN) to residents and families.	a. Number of refresher education sessions hosted. b. Number of nurses and personal support workers attended and completed the CAPCE education courses.	a. Two (2) refresher education sessions (in-person/ virtual) will be provided by December 31, 2024. b. Three (3) staff will have completed the CAPCE course by December 31, 2024.	Quality dimension may not be met due to availability of guest speaker, funding for education courses.
2. Offer Comprehensive Advanced Palliative Care Education (CAPCE) education courses.			