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	7.56	7.18	The organization selected this quality improvement target to continue to meet or exceed the overall Ontario average.	Oak Valley Health

Change Ideas

Change Idea #1   Digitalize ED tracking - incorporating the hospital tracking tool in PointClickCare.

Methods	Process measures	Target for process measure	Comments
1. Develop a process to digitalize hospital tracking in PointClickCare A. Identify current functions included in the PCC Hospital Tracking Portal. B. Collaborating with NP, and MD to identify what important data to display in the portal. C. Develop a process map (relating to staff education) on how to enter hospital admission and run reports. D. Analyze the trends for each ED transfer. Will look at residents who are frequently transferred to hospital to identify the reason of transfer and provide interventions for early detection. Look at transfers according by day of week to identify weakness or reasons for increase in transfer - Identify nurse and physician responsible for transfer. This will help measure if further education is needed for those individuals to help reduce ED transfer. Will use this as baseline measurement to see if there will be changes in the numbers of avoidable ED transfer by comparing it on a quarterly basis.	The percent of registered staff that will be trained in the new digitalization tool.	100% of the registered staff will be trained in the new tool by December 31, 2023.	

Change Idea #2   Collaborate with External Partners such as Oak Valley Health and Home and Community Support Services.

Methods	Process measures	Target for process measure	Comments
1. Support training on early recognition of residents at risk for ED visits. A. Arranging group training in person and on Microsoft TEAMS on how to enter and run report in PointClickCare hospital tracking (RNs and RPNs). B. Create FAQS sheets word doc. for staff to access relating to PointClickCare hospital tracking. C. After analyzing the trends, more detailed training will be provided to Registered Staff. D. Early detection training to all front line staff (RN, RPN, PSW). 2. Provide preventative care and early treatment for common conditions education. A. Collaborating with Oak Valley Health Nurse Practitioner (NP). B. Arranging in person training and just in time training with NP.	The percentage of front line staff that will be trained on early detection of residents at risk for ED visits.	90% of the front line staff will be trained on early detection by December 31, 2023.	

Theme III: Safe and Effective Care

Measure **Dimension:** Safe

Indicator #2	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	16.87	15.18	The organization selected this quality improvement target as the goal to meet or exceed the corporate average.	MediSystems Pharmacist Consultant, Mackenzie Health Loft Team, Psychogeriatric Consultant, Geriatric Psychiatrist

Change Ideas

Change Idea #1   Identify residents on antipsychotics without a medical diagnosis of psychosis.

Methods	Process measures	Target for process measure	Comments
1. Conduct monthly meeting with the interdisciplinary team to identify residents on antipsychotic. A. Meetings will be done in person or Microsoft Teams (case by case). B. Will review all high risk cases (increased/worsen responsive behaviour). C. An excel spreadsheet will have information on resident's name, current antipsychotic medication ordered, meet or do not meet criteria, date medication was started, responsive behaviour exhibited, and notes from previous meeting. D. Running a report in PointClickCare to identify all residents who are receiving antipsychotic medications.	The percentage of residents who are on antipsychotic medication will be identified.	100% of the residents on antipsychotics and residents who do not meet criteria will be identified by October 31, 2023.	

Change Idea #2 Analyze behaviours and triggers of residents with antipsychotic medication without diagnosis of psychosis.

Methods	Process measures	Target for process measure	Comments
2. Monthly review with the interdisciplinary team regarding residents' behaviour and the effectiveness of intervention for residents. A. Review effectiveness of current non-pharmacological intervention. B. Review effectiveness of current pharmacological intervention. C. Review progress notes for responsive behaviours.	The percentage of residents who have an intervention to reduce antipsychotic use.	100% of the residents will have trialed an intervention to reduce antipsychotic use by December 31, 2023.	

Change Idea #3 Enhance family involvement in providing alternative options to antipsychotic medication.			
Methods	**Process measures**	**Target for process measure**	**Comments**
1. Provide education on the proper use of the Antipsychotic medication to the family. A.. High level education session during family council meetings by pharmacist or NP. B. Create pamphlets for family to view. C. Discuss during annual care conference. 2. For every new resident admitted to the home with antipsychotic medication. A. History of residents with responsive behaviour will be noted to understand reason antipsychotic was started. To be completed in person or via telephone. B. If intervention to reduce antipsychotic dosage was trialed in the community. C. Education to family so they are aware goals to reduce antipsychotic use, side effect of antipsychotic, and alternative strategies that can be tried in the home. D. Evaluation to be done during initial care conference, and annual care conference on any changes with resident's responsive behaviour.	Number of education sessions delivered on the use of antipsychotic medications and alternative options to families.	5 education sessions on the use of antipsychotic medication and alternative options will be delivered to families by December 31, 2023.	

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