Access and Flow

Measure - Dimension: Efficient

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Rate of ED visits for modified list of ambulatory care–sensitive conditions* per 100 long-term care residents.	O	Rate per 100 residents / LTC home residents	CIHI CCRS, CIHI NACRS / October 1st 2022 to September 30th 2023 (Q3 to the end of the following Q2)	14.93	9.00	Our current performance is better than the provincial average. Nevertheless, our target is set to improve upon our current performance.	

Change Ideas

Change Idea #1 Hire a full-time Nurse Practitioner (NP) via provincial funding through the "Hiring More Nurse Practitioners for Long-Term Care Initiative". The NP will work with attending physicians and nursing staff to minimize the need for hospital transfers (for such conditions as: fall injuries that may require sutures; pneumonia; and congestive heart failure).

Methods	Process measures	Target for process measure	Comments
Implement a recruitment process to hire a NP in conjunction with Middlesex County's Human Resources Department.	Number of Emergency Department transfers reviewed by Quality Improvement Committee quarterly.	50% of residents will be seen by the NP before being transferred to hospital.	n/a

Change Idea #2	Through available provincial funding, explore feasibility of purchasing specialized equipment (e.g., point-of-care testing) and additional staff training to provide more specialized in-house care and avoid unnecessary trips to the hospital. Also, explore feasibility of more timely access to mobile diagnostic testing (x-ray, ultrasound, electrocardiogram) done by external health care providers (to avoid hospital transfer for such).		
Methods	Process measures	Target for process measure	Comments
Collaborate with mobile service provider in order to establish optimal communication regarding service requests made by The Home, and to establish optimal service provider response time targets.	Number of mobile procedures reviewed by the Quality Improvement Committee every quarter.	Increase use of mobile x-ray and ultrasound services by 5% in 2024/25 versus 2023/24.	n/a

Change Idea #3	Reduce the risk of fracture injury leading to the need for hospital transfer by ensuring applicable residents are receiving Antiresorptive Therapy (Vitamin D, Calcium) for bone strength.		
Methods	Process measures	Target for process measure	Comments
Residents with a Fracture Risk Score (from each resident's quarterly health assessment) of 4+ will be referred by the RAI Coordinator to the attending physician for Antiresorptive Therapy consideration.	Number of monthly referrals made by the RAI Coordinator to the attending physician for Antiresorptive Therapy.	100% of residents with a Fracture Risk Score of 4+ will be considered for Antiresorptive Therapy.	n/a

Safety

Measure - Dimension: Safe

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of LTC home residents who fell in the 30 days leading up to their assessment	O	% / LTC home residents	CIHI CCRS / July 2023–September 2023 (Q2 2023/24), with rolling 4-quarter average	20.87	15.00	Our risk-adjusted fall rate betters the provincial average. But, we anticipate that our Change Ideas will bring about an even better (lower) fall rate versus the provincial average.	

Change Ideas

Change Idea #1	Implement new Cordless Falls Prevention Monitoring System (bed pad alarms, (wheel)chair pad alarms, floor mat alarms and motion sensor alarms), in order to alert stall of residents who may be ambulating/self-transferring, but at risk of falling without staff assistance. A cordless system will eliminate cord damage (associated with conventional corded systems) - the primary cause of false and failed alarms.

Methods	Process measures	Target for process measure	Comments
Our provincial Nursing funding enables the purchase of the cordless technology. Our Maintenance staff will install the necessary monitors by early 2024/25.	Number of residents with cordless falls prevention technology in place per month.	All applicable residents will have this cordless falls prevention technology implemented in 2024/25.	n/a

Change Idea #2	Residents who have multiple falls in a month will be referred to the pharmacist for a medication review, should such residents be on medication(s) known to have side effects that may increase the risk for falls.		
Methods	Process measures	Target for process measure	Comments
The Clinical Support Nurse (and Chair of the home's Falls Prevention Committee) will review falls monthly, and initiate a medication review by the pharmacist where applicable residents are receiving medication that may contribute to falls (consideration will be given to amending dose strength and/or alternate medication, through and with the attending physician and interdisciplinary care team).	Number of medication reviews conducted by pharmacist, further to falls referral.	100% of residents referred for a medication review due to falls will have review completed.	n/a

Change Idea #3	Residents who have multiple falls in a month will be reviewed to determine their candidacy to participate in the Home’s Restorative Nursing Program (e.g., for strength and balance training regarding walking or self-transferring – interventions that may lead to falls prevention).		
Methods	Process measures	Target for process measure	Comments
The Clinical Support Nurse (and Chair of the home's Falls Prevention Committee) will review falls monthly, and initiate a referral to the RAI Coordinator for Nursing Restorative Program consideration (where Restorative Nursing intervention may assist in falls prevention).	Number of referrals made for Restorative Nursing Program consideration, further to referral to the RAI Coordinator.	100% of residents referred for Restorative Nursing Program will be reviewed/considered for the program.	n/a