

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)	41.76	29.00	Continuing to recruit Nurse Practitioner; current project re Palliative Approach to Care will continue together with 2 new change ideas.	

Change Ideas

Change Idea #1 Develop policies and procedures that do not automatically trigger an ED visit after a fall.

Methods	Process measures	Target for process measure	Comments
Explicit criteria for when a resident can be monitored at Marianhill, careful monitoring and documentation and an evaluation of fall risk factors by a clinician (physician, nurse practitioner, physician assistant)	# residents fell with no subsequent change to vitals or baseline status sent to ED over # residents who fell	reduction by 10% of current ED visit rate	If the resident subsequently manifests a fall-related injury, it will be identified promptly and evaluated and managed as clinically indicated.

Change Idea #2 Investigate and Implement PreviewED

Methods	Process measures	Target for process measure	Comments
Management will research PreviewED and complete education and training to support PSW's completing the training and utilizing this tool (paper based)	# residents who had a completed PreviewEd assessment completed over # residents who were sent to ED	Reduction by 10% of current ED visit rate.	PreviewED focuses on four conditions, Urinary Tract Infections, Pneumonia, Congestive Heart Failure and Dehydration; registered staff are guided to assess the resident and take appropriate action which may include notification of a nurse practitioner or physician.

Equity

Measure - Dimension: Equitable

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and anti-racism education	O	% / Staff	Local data collection / Most recent consecutive 12-month period		100.00	The education plan developed based on gaps in knowledge will be mandatory for all management staff.	

Change Ideas

Change Idea #1 Development of a work plan to ensure all requirements of the LSAA and MSAA are addressed

Methods	Process measures	Target for process measure	Comments
Management will complete an assessment	All managers will complete education on Equity, Diversity and Inclusion.	100% completion of mandatory education	