

## 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)	8.24	8.24	Riverview Gardens is one of the top performers for this metric. Our goal is to maintain our performance.	

## Change Ideas

**Change Idea #1** Introduce communication and assessment tools for registered staff use in determining the most appropriate course of action when considering the need to transfer a resident to acute care.

Methods	Process measures	Target for process measure	Comments
The nursing department will implement the SBAR tool for use by registered nursing staff.	Number of registered staff communicating using the SBAR tool.		There will be a gradual monthly increase in use of the SBAR tool starting in April 2024 through March 2025 with a goal of 100% of registered staff using the tool to communicate with the physician group by the end of the fiscal year.

**Change Idea #2** Build capacity for registered staff to conduct advanced care planning discussions through introduction of conversation guides.

Methods	Process measures	Target for process measure	Comments
All registered staff to receive education on conversation guide.	Number of registered staff trained in advanced care planning with the use of the conversation guide.		80% of registered staff to complete training on advanced care planning by March 2025.

## Experience

### Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents responding positively to: "What number would you use to rate how well the staff listen to you?"	O	% / LTC home residents	In house data, NHCAHPS survey / Most recent consecutive 12-month period	36.08	39.68	80% of respondents scored this question eight and above on a scale of 1-10. Our goal is to increase this.	

### Change Ideas

Change Idea #1 Reinforce the cell phone policy to reduce or eliminate distractions while staff are working.

Methods	Process measures	Target for process measure	Comments
A revised cell phone policy outlining clear expectations will be developed and communicated to all staff.	Number of staff that sign to confirm understanding of the expectations around use of cell phones in the home.	100% of staff will sign the new policy within three months of it being established.	Total Surveys Initiated: 97 Total LTCH Beds: 320

Change Idea #2 Additional customer service education to be provided to all staff.

Methods	Process measures	Target for process measure	Comments
Nursing staff will receive education about customer service during Spring training; all other departments will receive the same education through their department meetings.	Number of staff that attend customer service training per month.	100% of Riverview Gardens staff will receive customer service education by August 2024.	

## Measure - Dimension: Patient-centred

Indicator #3	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".	O	% / LTC home residents	In house data, interRAI survey / Most recent consecutive 12-month period	67.35	74.25	67% of respondents indicated that they felt comfortable most of the time or better. Our goal is to increase this.	

## Change Ideas

**Change Idea #1** Trial a "welcome" information sheet for new residents and families informing them of roles of staff and inviting them to provide feedback to any staff member.

Methods	Process measures	Target for process measure	Comments
The welcome sheets will be provided to each new resident and their family on one area of the home to start. Similar sheets will be introduced to other areas of the home following a trial period in order to incorporate feedback, if any.	Number of home areas with "welcome" sheets per month; number of comments regarding the use of the sheets	Pending acceptance, 100% of new residents to the home will receive a welcome sheet with helpful information and directions where to provide feedback by December 2024.	Total Surveys Initiated: 98 Total LTCH Beds: 320

**Change Idea #2** Relocate resident council meetings to a confidential space.

Methods	Process measures	Target for process measure	Comments
Recreation staff will relocate resident council meetings from a public space where people traveling through are able to overhear the comments to a private space where only those in attendance at the meeting are able to hear the comments.	Number of resident council meetings held in private space.	100% of resident council meetings will be held in a private setting starting in April, 2024.	

## Safety

### Measure - Dimension: Safe

Indicator #4	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	20.23	18.25	RVG is a least restraint home with 64 secure beds. We are aiming to have a 10% improvement in the first year with a goal to increase this in subsequent years.	

### Change Ideas

Change Idea #1 Plan the structure and resources required to implement a nursing restorative program.

Methods	Process measures	Target for process measure	Comments
Establish an interdisciplinary nursing restorative committee to develop a project plan and timeline.	Number of committee meetings held and completion of the project plan with a timeline.	The committee will be struck and the first committee meeting will be held by April 30, 2024.	

**Change Idea #2** Initiate weekly falls huddles with staff on one home area to review the resident falls and discuss opportunities for changes to the Care Plan to decrease falls.

Methods	Process measures	Target for process measure	Comments
The falls lead will identify the home area with the highest fall rate to start and will spread the initiative to other areas as indicated.	Number of weekly huddles reviewed per month at the Falls Committee meetings.	There will be one huddle per week on the home area with the highest number of resident falls starting May 2024 with a possibility of increasing the number of huddles and the number of home areas through the end of the fiscal year.	

**Change Idea #3** Liaison between nursing and Behavioural Supports Ontario (BSO) staff to develop resident specific interventions to provide engagement activities during times of higher falls incidence.

Methods	Process measures	Target for process measure	Comments
BSO staff to attend falls committee meetings and weekly huddles to gather information and plan for resident engagement activities.	Number of fall committee meetings and falls huddles with BSO staff in attendance.	80% of falls committee meetings and falls huddles will be attended by BSO staff.	

**Change Idea #4** Increase awareness of high fall risk residents through existing venues such as regularly scheduled staff meetings.

Methods	Process measures	Target for process measure	Comments
Expand meeting content to include a discussion of residents with greater than three falls per month to review opportunities for prevention.	The number of staff meetings that include a review of residents with a high falls rate and interventions for prevention.	100% of staff meetings on home areas with residents with a high falls rate will include a review of the falls and interventions for prevention.	

**Measure - Dimension: Safe**

Indicator #5	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	O	% / LTC home residents	CIHI CCRS / July 2023–September 2023 (Q2 2023/24), with rolling 4-quarter average	40.87	34.00	Our goal is to move toward the provincial average; and this target is realistic given the maturity of our program development.	

**Change Ideas**

**Change Idea #1** Riverview Gardens will have an interdisciplinary antipsychotic review committee meeting for the purpose of reviewing medication profiles of residents receiving antipsychotic medications with a goal to discontinue any as indicated.

Methods	Process measures	Target for process measure	Comments
Regularly scheduled committee meetings will be established with a goal to review resident antipsychotic medications on one to two home areas per meeting.	Number of resident medication profiles reviewed at each meeting.	100% of residents receiving antipsychotic medications will have a medication review completed by December 31, 2024.	

**Change Idea #2** Review documentation for residents receiving antipsychotics.

Methods	Process measures	Target for process measure	Comments
At the antipsychotic review committee attendees will review documentation for those residents having their medications reviewed at the committee.	Number of documentation reviews completed per meeting.	100% of residents receiving antipsychotic medications will have a medication review completed by December 31, 2024.	

Change Idea #3 Education sessions will be provided by our consultant pharmacist regarding the use of antipsychotic medications.

Methods	Process measures	Target for process measure	Comments
We will host education sessions prepared by our consultant pharmacist regarding the use of antipsychotic medications. These sessions will be provided for registered staff. One of the live sessions will be recorded for training purposes to provide the opportunity for those unable to attend, and for new hires.	Number of registered staff that attend the antipsychotic education session.	100% of registered staff will receive antipsychotic education by September 2024.	