Subject: Seniors Services Quality Improvement Report September to December 2018

Report to: Public Health and Social Services Committee

Report date: Tuesday, February 19, 2019

Recommendations

That this report BE RECEIVED for information.

Key Facts

The purpose of this report is to provide Committee and Council with highlights of quality initiatives and outcomes in the fourth quarter of 2018 in Senior Services.

Areas of focus in this quality update include:

- Standardizing Staffing Levels in Seniors LTC Homes
- Technology and Innovation in Seniors LTC Homes
- Serving the Community - Seniors Community Programs.

Key Metrics for 2018 are provided in Appendix 1.

Financial Considerations

The activities highlighted in this report were funded within the 2018 approved operating budget. The Ministry of Health and Long-Term Care (MOHLTC) and the Niagara Haldimand Brant Local Health Integration Network (HNHB LHIN) are the primary sources of funding for the Seniors Services division. Other funding sources include user fees and regional levy.

Analysis

LTC Homes: Standardizing and Optimizing Staffing Patterns

In late 2017, Seniors Services completed a staffing study to determine optimal staffing levels, and a pilot study to evaluate the effectiveness of increasing recreation staffing hours (COM 03 – 2017, COM 08 – 2017).

In 2018, Seniors Services built on this work by introducing a project to standardize schedules across the eight Long-Term Care (LTC) homes. The project included a review of current staffing levels, a mapping of hours required during peak resident care times
and a review of best practice. Through this analysis, optimal staffing patterns were identified.

As part of the newly negotiated CUPE 1263 agreement, a reorganization of the current schedule was required and this work presented the opportunity to implement a consistent staffing pattern across sites. Shifting to consistent staff schedules across homes is desirable as this supports efficiency in the scheduling process, enables staff to work between homes and provides uniformity in standardizing practices and processes.

The scheduling project benefited from a timely MOHLTC increase to base funding mid-year. Through the use of this funding, the homes were able to add a 12:00 pm to 8:00 pm Personal Support Worker (PSW) shift to help offset peak pressures associated with shift exchange and to add extra assistance in the care of residents with complex needs.

MOHLTC funding also enabled homes to add four hours of recreation to the evening shift on the dementia units. This additional four-hour shift offers support on the unit to help prevent and/or manage escalating resident responsive behaviours related to ‘sundowning’ (a neurological phenomenon associated with increased confusion and restlessness in patients with dementia).

The additional funding and temporary enhancements to staffing has increased the staffing to resident care ratio by 0.2 hours per bed day. Seniors Services continues to advocate with MOHLTC for an increase to four hours of care per resident per day. Seniors Services is asking that the temporary increases to staffing be approved as permanent increases through the 2019 budget process (subject to continued MOHLTC funding levels).

**Technology and Innovation in Seniors LTC Homes**

Seniors Services utilizes a variety of technology to support the care and services of residents in the Long-Term Care homes. Seniors Services is continuously looking for opportunities to introduce innovation into the day-to-day operations of the eight homes to mitigate responsive behaviours, enhance efficiencies and improve clinical outcomes/quality of life.

**Mitigating Responsive Behaviours**

An area of focus in recreation has been exploring the use of technology to enhance meaningful activities. In 2018 two homes trialled a new interactive technology called ABBY for residents with cognitive impairment. This interactive technology affords residents the opportunity to engage in various activities activated by switches, knobs, texture swatches and a touch screen. The goal is for residents to interact with ABBY by engaging in a wide variety of activities including videos, sounds, pictures and touch screen activities such as matching games and finger painting. These can be customized with resident personal content. ABBY is meant to stimulate and engage residents and
reduce responsive behaviors. The pilot implementation has been very successful (calming agitated residents, eliciting a response from non-verbal residents, providing an activity residents want to return to repeatedly). ABBY will be installed in all homes in 2019.

Enhance Efficiencies

Seniors Services has been using Point Click Care (PCC) software for the last ten years to populate the resident electronic health record. Using PCC, regulated staff such as nurses and physicians document in the resident’s clinical record progress notes, care plans and assessments. Front line staff use an application called Point of Care (POC) where, as required under the Long-Term Care Home (LTCH) Act, they complete extensive documentation of all aspects of daily living activities including details pertaining to eating, toileting, dressing and grooming. The POC program was accessed by PSW’s using stationary screens bolted onto walls throughout corridors. In 2018, as the mobile stations were due for replacement, Seniors Services leveraged advances in technology and transitioned from POC stations to iPads to eliminate travel time to POC stations for documentation purposes. Implementation of the change was completed ahead of project schedule with overwhelmingly positive feedback from all staff involved.

Although the introduction of iPads has been an effective tool in enhancing efficiencies, it is recommended that even greater benefit would come from a decrease in documentation requirements. The current provincial government is exploring opportunities to decrease unnecessary work in Long-Term Care. Seniors Services has provided a number of recommendations focused on, ‘releasing time to care’ by ensuring that staff time is spent providing hands on care for residents, rather than engaging in extensive repetitive and low value documentation.

Enhancing Clinical Outcomes

Technology is evolving rapidly and presents exciting opportunities to improve clinical practice. An example of this direction is the enhanced skin and wound care project. Residents admitted to our Long-Term Care homes from hospital and community may have wound related challenges. Often the homes are able to improve and eventually heal these wounds. However, some residents are very frail and have complex wounds that require advanced nursing skills. In support of addressing the needs of residents with complex wounds Seniors Services will be implementing a recently released wound care application that supports enhanced wound care practices.

Some examples of improvement opportunities afforded through the application include:
- automated recording of wound changes via images uploaded into the resident chart, non-contact measurements and staging of wounds via a hand-held device, graphical trending analysis to view wound changes over time,
- effective assessment and management of wounds including the Braden Scale for the prediction of pressure injury risk and the PUSH Tool for measurement of pressure injury healing, and
- reduced workload as results are automatically uploaded into a resident’s chart ensuring more accurate and complete documentation for the care team leading to improved resident outcomes.

To support the nursing capacity building required to use this skin and wound application, nursing staff will be completing a Skin and Wound Care Certificate through York University in the first quarter of 2019. Seniors Services will be rolling out the app across the eight LTC homes in Q1 and Q2 of 2019 using a staggered implementation plan with the final go live date in April 2019.

**Community - Seniors Community Programs**

Seniors Community Programs (SCP) provides a broad continuum of supports intended to assist seniors in their effort to remain living independently in the community. Early supports range from community-based exercise classes to group-based program support (i.e. Adult Day Program, wellness programs) to in-home supports (i.e. Respite Companion and Outreach Services), through to 24/7 assisted living support services (i.e. Deer Park Suites).

In 2018, Outreach Services expanded across Niagara as a result of new LHIN investment. Seniors Community Programs began a formal LEAN review to examine current state and determine future directions that will complement available resources, optimize utilization of existing resources by reducing duplicate efforts, and improve access through health system partner education, resulting in referrals to the most appropriate provider. A three-day Kaizen event was held in December 2018 with more than 15 community partners participating to yield an implementation plan with key areas of focus for 2019. Data will be collected throughout 2019 to allow for analysis of trend patterns, early identification of clients in need of a coordinated community plan and mobilization of partners for that purpose.

Seniors Community Programs has partnered with Niagara Emergency Medical Services (EMS) at Deer Park Suites Assisted Living in Grimsby. In the fall of 2018, front line staff were trained on an international screening tool called ‘I Stumble’ to determine the need for 911 calls for their clients. Staff have been trained, equipment resources purchased and the pilot was initiated. Metrics are in place to monitor the number of falls that occur and do not require a 911 call, due to application of the screening tool. The 2019 data will be analyzed and implemented to other Niagara assisted living providers in collaboration with EMS. This supports the broader strategic direction, to support the hospital system, by reducing unnecessary 911 calls and ER visits.

Seniors Community Programs provides an exercise program in the community called ‘Healthy, Safe and Strong’. There has been significant uptake by seniors to attend
the 26-week exercise program offered in 12 locations across Niagara. Feedback from participants, along with some medical practitioner comments, indicate improvements in balance, flexibility and strength, which is translating into improved health markers such as blood pressure, weight, and falls risk. The program is intended to be an introduction to exercise for health with participants transitioning to community-based exercise programs for on-going fitness. Increasingly, participants are wanting to maintain their involvement with the program beyond the defined 26-week period. This speaks to the benefits they are realizing, in addition to the program environment that supports participant’s abilities.

**Alternatives Reviewed**

Not Applicable.

**Relationship to Council Strategic Priorities**

This report provides information on quality improvement initiatives and outcomes in Long-Term Care and Community Services. The work in this division supports a number of Regional Council’s Strategic Priorities including: Doing Business Differently and Advancing Organizational Excellence.

**Other Pertinent Reports**

- COM 03-2017 - Seniors Services Quality Improvement Report October to December 2016
- COM 08-2017 - Medical Director’s Annual Report 2016 – Long Term Care Homes

**Prepared by:**
Kim Eros, Associate Director Clinical & Support Services, Community Services

**Recommended by:**
Adrienne Jugley, BA, MSW, RSW, CHE Commissioner, Community Services

**Submitted by:**
Ron Tripp, P.Eng.
Acting Chief Administrative Officer

*This report was prepared in consultation with Jordan Gamble, Program Financial Specialist and reviewed by Henri Koning, Director, Seniors Services.*

**Appendices**

Appendix 1 Seniors Services Report Card 2018 – 2019
# Seniors Services Report Card 2018 – 2019

<table>
<thead>
<tr>
<th>Measures</th>
<th>Definition</th>
<th>2018 Q1</th>
<th>2018 Q2</th>
<th>2018 Q3</th>
<th>2018 Q4</th>
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<tbody>
<tr>
<td><strong>Seniors Long Term Care Home Metrics</strong></td>
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<tr>
<td>Cognitive Impairment</td>
<td>This metric provides a percentage of residents whose diagnosis includes dementia, other than Alzheimer’s or related neurologic diseases after the resident assessment has been completed.</td>
<td>67.1</td>
<td>67.2</td>
<td>66.1</td>
<td>66.7</td>
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<tr>
<td>Resident Satisfaction Survey</td>
<td>This metric provides a measure of the residents' perception of services and overall rating of a great place to live, through an annual survey. The 2017 MBN median for upper-tier municipalities was 95%. In 2017, all eight Niagara Region LTC was 95%.</td>
<td>95%</td>
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<td>Pressure Ulcers</td>
<td>This is a measure of the # of worsened stage 2-4 pressure ulcers documented on their target assessment and the stage of pressure ulcer is greater on their target assessment than on their prior assessment (Prov. Avg. 2.6%).</td>
<td>3.40</td>
<td>3.66</td>
<td>4.08</td>
<td>3.7</td>
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<td>Outbreaks</td>
<td>The resident home area may be declared in outbreak by Public Health if two or more residents residing in same resident home area have two or more consistent infectious symptoms (2017 total was 18).</td>
<td>10</td>
<td>4</td>
<td>0</td>
<td>1</td>
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<tr>
<td>% of Resident who have fallen in the last 30 days</td>
<td>This is a measure of the % of residents who sustained a fall in last 30 days recorded on their target assessment. Provincial target is 16.25%.</td>
<td>16.29</td>
<td>15.76</td>
<td>17.23</td>
<td>17.25</td>
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<tr>
<td>% of Residents with New Fractures</td>
<td>This is a measure of the % of residents who sustained a fracture during this quarter on their most recent assessment. This total includes any fracture that may occur. The goal is to minimize all fractures. Provincial target 1.2%.</td>
<td>0.96</td>
<td>1.66</td>
<td>1.89</td>
<td>1.74</td>
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<td><strong>Seniors Community Programs</strong></td>
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<td>Number of unique individuals served in 2018</td>
<td>Individual is counted once in a calendar year regardless of the number of</td>
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<td></td>
<td>services one individual may be accessing.</td>
<td>1807</td>
<td>1695</td>
<td>1720</td>
<td>1682</td>
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<td>% satisfied with overall services</td>
<td>Average across all SCP programs.</td>
<td>97%</td>
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<td># of complex case consultations</td>
<td>Multi-agency collaboration required to support diverse needs of individual</td>
<td>15</td>
<td>28</td>
<td>4</td>
<td>10</td>
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<td>in developing a community plan of support/care.</td>
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