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**Subject:** Seniors Services Quality Improvement Report 2018/2019

**Report to:** Public Health and Social Services Committee

**Report date:** Tuesday, June 11, 2019

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## 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 2018 as well as in the first quarter of 2019 in Senior Services. Areas of focus in this quality update include:

- Indicator Analysis – Falls Prevention
- Resident Satisfaction Survey 2018 Results
- Quality Improvement Plans
- Best Practices Spotlight Organization (BPSO) Designation with the Registered Nurses Association of Ontario (RNAO)

Key Metrics for 2019 are provided in Appendix 1.

## Financial Considerations

The activities highlighted in this report were funded within the 2018 and 2019 approved operating budgets. 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

### Indicator Analysis – Falls

In the fall of 2018, Long-Term Care (LTC) homes received supplemental funding from the MOHLTC to support the falls program. A per diem of \$100 was received per resident (e.g. 80 bed home received \$8,000) to purchase equipment to:

- prevent falls
- reduce injuries
- promote mobility and
- help prevent a decline in functional status in the residents.

Niagara Region's LTC homes purchased a range of items in support of decreasing falls including chair alarms, bed alarms, coloured call bell cords (to enhance visibility for residents) and non-slip socks. These strategies help to enhance resident safety and quality of life as well as preventing residents from needing to go to the hospital due to falls. Falls prevention is a key program in Seniors Services as seniors are at a high risk of falls related to acuity and cognitive impairment. The Seniors Services falls prevention program focuses not only on reducing falls but also more importantly, on reducing injuries resulting from falls.

Seniors Services tracks two metrics related to falls to track the effectiveness of the falls prevention program.

*Percentage of residents who have fallen in the last 30 days:* this is a measure of the percentage of residents who sustained a fall in the last 30 days.

The average of the eight homes is 18.25%, slightly higher than the provincial average of 16.25%. This may in part be attributed to the fact that the relative acuity of residents is also higher across our eight homes than the provincial average (i.e. the relative adjusted provincial acuity average is 100 and the rate for Niagara Region homes is 104.04). The homes will be leveraging the equipment purchased through the supplemental funding to further enhance the effectiveness of the falls program and decrease overall falls.

*Percentage of residents with new fractures:* this is a measure of the percent of residents who sustained a fracture in the last 30 days.

The average of the eight homes is 0.79%, slightly better than the provincial average of 2.1%.

### **Resident Satisfaction Survey**

In accordance with Ministry requirements, Seniors Services annually issues satisfaction surveys to residents and families. To improve the value of the survey a small quality improvement group worked in consultation with the Region's Internal Control and Organization Performance team to review and streamline the survey tool. The resultant survey includes 31 standardized questions and was issued to residents and families in both paper and electronic formats.

The revised survey maintains questions consistent with Municipal Benchmarking Network Canada to ensure that Seniors Services can continue to compare performance data with other municipal homes.

The surveys issued in December 2018 showed an overall satisfaction rate of 95% among residents and family members. This level of satisfaction has been consistent for the last three years.

The areas where residents and families rated the homes most favourably include:

- Residents are treated with compassion and respect by staff (98%),
- Residents would recommend the home and organization to others (97%) and
- Residents feel safe living in our homes (96%).

Areas identified for improvement included quality of food and snacks (84% satisfaction score) and physician helpfulness (87% satisfaction score). Action plans have been developed by home Administrators in consultation with the Residents Councils and Family Councils to enhance the resident and family satisfaction in these areas.

Each home has posted the results of the survey on their Resident and Family information board and has reviewed the results with the Resident and Family councils.

### **Quality Improvement Plans**

Seniors Services is required under the HNH B LHIN Long-Term Care Homes Accountability Agreement (LSAA) and Health Quality Ontario (HQO) to submit an annual Quality Improvement Plan. This plan focuses on key metrics aligned with provincial priorities. These measures include Resident Experience (resident and family satisfaction survey results and action plans), complaints acknowledged in a timely manner, palliative care needs (working in collaboration with the Nurse Led Outreach Team and Hospice Niagara), and emergency room avoidance (working in collaboration with Niagara Health to minimize transfers to acute care when possible).

Seniors Services has developed plans that include specific targets and actions that reflect the Ministry of Health's improvement priorities in collaboration with each home's Quality Committee and Quality Improvement Program. The homes will be working on these plans throughout 2019 and will implement change ideas to move their key performance indicators toward identified targets.

The plans support safe, efficient and resident centered care and are available to the public.

### **Best Practices Spotlight Organization (BPSO) Designation with Registered Nurses Association of Ontario (RNAO)**

The Best Practices Spotlight Organization Designation is a voluntary initiative, through the Registered Nurses Association of Ontario. Participating organizations, reflecting a desire to leverage best practice wherever possible, strive for continuous improvement and provide the highest level of care for residents, applied through a request for proposals process. The Seniors Services RNAO BPSO journey began in 2016 in three of the Long-Term Care homes: Deer Park Villa, Rapelje Lodge and Woodlands of Sunset. The group was committed to implementing three Best Practice Guidelines (BPG's) in partnership with RNAO over a three-year period. The team completed a gap

analysis and were able to engage and train frontline staff in the methodology of RNAO BPG's. The teams worked collaboratively to improve nursing leadership skills, skin and wound care, and pain assessment over this period across all eight LTC homes. The team successfully received official designation of Best Practice Spotlight Organization in April of 2019 by completing all RNAO requirements across all eight homes. The group will continue to improve and transform nursing practice in Seniors Services through knowledge translation by completing two other RNAO guidelines over the next two years. The areas of focus include care transitions and diversity in health care best practice guidelines.

### **Alternatives Reviewed**

Not Applicable

### **Relationship to Council Strategic Priorities**

Not applicable (pending the development of Council's new Strategic Priorities).

### **Other Pertinent Reports**

COM 7-2019	Seniors Services Quality Improvement Report Sept. – Dec. 2018
COM 19-2018	Seniors Services Quality Improvement Report Jan. – March 2018
COM 4-2018	Seniors Services Quality Improvement Report Oct. – Dec. 2017

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*This report was prepared in consultation with Jordan Gamble, Program Financial Specialist.*

### **Appendices**

Appendix 1                      Seniors Services Report Card 2018 – 2019

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Measures	Definition	2018 Q4	2019 Q1	2019 Q2	2019 Q3
<b>Seniors Long-Term Care Home Metrics</b>					
<b>Cognitive Impairment</b>	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.	66.7	67.21		
<b>Resident Satisfaction Survey</b>	This metric provides a measure of the residents' perception of the services and overall rating of a great place to live. The resident satisfaction survey is issued annually. The 2017 MBN median for upper-tier municipalities was 95%. In 2017 for all 8 Niagara Region LTC was 95%	95%			
<b>Pressure Ulcers</b>	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%)	3.7	3.73		
<b>Outbreaks</b>	The resident home area may be declared in outbreak by Public Health if two or more residents residing in the same resident home area have two or more consistent infectious symptoms (2017 total was 18)	1	4		
<b>% of Resident who have fallen in the last 30 days</b>	This is a measure of the % of residents who sustained a fall in the last 30 days recorded on their target assessment. (Prov. Aver. 16.25%)	17.25	18.25		
<b>% of Residents with New Fractures</b>	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. (Prov. Aver. 2.1%)	1.74	0.79		

<b>Seniors Community Programs</b>					
<b>Number of unique individuals served in 2018</b>	Individual is counted once in a calendar year regardless of the number of services one individual may be accessing	1682	1698		
<b>% satisfied with overall services</b>	Average across all SCP programs	97%			
<b># of complex case consultations</b>	Multi-agency collaboration is required to support the diverse needs of the individual in developing a community plan of support/care	10	23		