
Subject: Senior Services Quality Improvement Report 2019

Report to: Public Health and Social Services Committee

Report date: Tuesday, December 3, 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 for Seniors Services in 2019. Areas of focus in this quality update include:

- Northland Pointe Peritoneal Dialysis
- Decreasing ER visits: Community Programs
Long-Term Care

Financial Considerations

The activities highlighted in this report were funded within the 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 levy.

Analysis

Northland Pointe Peritoneal Dialysis

Dialysis is the process of removing waste products and excess fluid from the body. It is necessary when the kidneys are not able to filter the blood properly. There are two types of dialysis, hemodialysis and peritoneal dialysis.

Hemodialysis – In this treatment, blood is withdrawn from the body by a machine. The machine filters wastes, salts and fluid from the blood when kidneys are no longer healthy enough to do this work adequately. Hemodialysis treatments are provided in a hospital dialysis unit.

Peritoneal Dialysis – This treatment works on the same principle as hemodialysis, but the blood is cleaned while still inside the body rather than in a machine. This treatment can be provided in a long-term care setting using a cycler as the resident is sleeping.

Currently across Niagara, long-term care (LTC) residents requiring dialysis only have the option of hemodialysis as a treatment. Each resident on hemodialysis goes to hospital two to three times per week for treatment. Residents are out of the home for up to eight hours on their treatment days. This treatment schedule and ongoing transfer to hospital significantly affects a resident's quality of life.

Seniors Services is collaborating with Niagara Health to introduce peritoneal dialysis as a new treatment option to long-term care residents with end-stage kidney failure requiring dialysis. This new pilot program will be starting at Northland Pointe in Port Colborne later this year.

Peritoneal dialysis has fewer side effects than hemodialysis because it is a more gentle type of treatment and does not require a transfer to hospital. Residents receive treatment each night, overnight, in the comfort of the long-term care home. This option supports residents to stay in the home and enjoy daily activities and meals.

The pilot program's effectiveness will be closely monitored and evaluated. If it is successful in achieving clinical goals and is a positive experience for Northland Pointe residents we will pursue the introduction of peritoneal dialysis services in our other seven long-term care homes.

Decreasing ER Visits: Community Programs

Deer Park Suites is an assisted living program co-located with Deer Park Villa Long-Term Care Home in Grimsby. Tenants rent their suite and have access to supports including personal care, medication reminders, laundry, light housekeeping, and attendant care from on-site personal support workers.

Deer Park Suites, as is typical of assisted living programs, does not have a Registered Nurse on site and therefore if a medical situation arises, staff access 911. To ensure appropriate use of 911 calls, Deer Park Suites collaborated with Niagara Emergency Management Services on a pilot project to reduce unnecessary/avoidable 911 calls and avert first responders from low acuity, non-emergent calls.

The pilot project included the implementation of the "IStumble" tool, a decision making tool for use by unregulated health professionals as part of falls management. The tool allows staff who come upon a situation to apply a decision-making framework that will safely confirm the need for emergency services or not. Staff was also introduced to new equipment to safely assist tenants who have had a fall, from a floor position into a seated position. The equipment is an inflatable device that raises the individual to a seated position allowing for a safe one-person transfer.

Throughout Q1 2019, 58% of falls incidents at Deer Park Suites were successfully addressed using the decision framework and the lift assist device. Comparing Q1 2018 over Q1 2019 there was an overall reduction of 24% in non-emergent 911 calls.

The pilot project was showcased at the 2019 Ontario Community Support Association Annual conference in October 2019 through a poster board session. The early results of the pilot are indicating the positive potential impact for assisted living environments in reducing use of emergency medical services and emergency department use.

Decreasing ER Visits: Long-Term Care

In support of minimizing the number of transfers to hospital from long-term care, a number of strategies have been implemented:

Infusion Therapy Program

Sixty (60) nurses have completed training and are now certified in managing intravenous (IV) infusion therapy. The ability to offer residents IV fluids in the LTC setting to prevent dehydration, to support palliative pain management through IV treatment and to provide IV antibiotics to address infections will all serve to decrease transfers to hospital.

Nexsys Cabinets – Electronic Emergency Stock Cabinets

Electronic emergency stock cabinets were implemented earlier in 2019 to provide the long-term care homes with 24/7 access to medications. This supports long-term care staff to provide a timely response to a change in status (such as palliative care associated pain medication, blood pressure medication or antibiotics) without relying on after-hour pharmacy resources. This effective new technology provided through the Pharmacy Contract is a recommended best practice identified in the Wettlaufer inquest recommendations.

Introduction of Suture Kits

Suture kits are now available at all the homes, to prevent a transfer to hospital for treating skin tears when there is a doctor or a nurse practitioner available.

Alternatives Reviewed

Not Applicable.

Relationship to Council Strategic Priorities

Healthy and Vibrant Community.

Other Pertinent Reports

None.

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This report was prepared in consultation with Gail Gill Administrator, Carol Rudel Administrator Seniors Community Programs and reviewed by Henri Koning, Director, Seniors Services.

Appendices

Appendix 1 Seniors Services Report Card 2018 – 2019

Appendix 1 Seniors Services Report Card 2019

Measures	Definition	2019 Q1	2019 Q2	2019 Q3	2019 Q4
Seniors Long Term Care Home Metrics					
Cognitive Impairment	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	66.1	65.79	
Resident Satisfaction Survey	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			
Pressure Ulcers	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	3.25	
Outbreaks	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 (2018 total was 15)	15	4	4	
% of Resident who have fallen in the last 30 days	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%)	17.05	18.25	17.00	
% of Residents with New Fractures	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	1.64	

Measures	Definition	2019 Q1	2019 Q2	2019 Q3	2019 Q4
Seniors Community Programs					
Number of unique individuals served in 2018	Individual is counted once in a calendar year regardless of the number of services one individual may be accessing	1682	1698	1748	
% satisfied with overall services	Average across all SCP programs	97			
# of complex case consultations	Multi-agency collaboration is required to support the diverse needs of the individual in developing a community plan of support/care	10	23	4	