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**Subject:** Seniors Services Quality Improvement Report – January to March 2020

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

**Report date:** Tuesday, June 16, 2020

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## Recommendations

1. 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 first quarter of 2020 for Seniors Services. Areas of focus in this quality update include:
  - Resident Satisfaction Survey Results
  - COVID-19 Seniors Services- Long Term Care
  - COVID-19 Seniors Services – Community Programs

## Financial Considerations

The activities highlighted in this report were funded within the 2020 approved operating budgets. The Ministry of Long-Term Care (MLTC) and Ontario Health West are the primary sources of funding for the Seniors Services division. Other funding sources include user fees and levy.

## Analysis

### Resident Satisfaction Survey Results

The *Long-Term Care Homes Act, 2007* requires long-term care (LTC) homes across Ontario to administer an annual survey to measure resident / family satisfaction. To meet this requirement, and as part of the division's Continuous Quality Improvement program, Seniors Services issued an annual survey to residents and families in the fall of 2019.

The survey tool used incorporates a number of questions that are consistent across municipal LTC homes. The data collected is shared with the Municipal Benchmarking

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Network Canada (MBN) to support benchmarking performance outcomes with other municipal long-term care homes

Residents and families were provided the option to complete the survey in hard copy or electronically. In total, 351 surveys were completed, 23% of responses were by residents and 77% of responses were by families.

The average overall satisfaction score across the eight homes was 94% for the first quarter of 2020. The overall satisfaction has been relatively consistent over the last four years, with a slight decrease this year from the 2019 outcome of 95%. The MBN average for municipal LTC homes for 2019 was 93%.

The three questions on the survey that generated the highest average scores across the eight homes were as follows:

<b>Survey Question</b>	<b>Response Score</b>
Staff treat me with compassion and respect.	98%
Do you get a good impression as you enter the home?	97%
Do you feel safe in the home?	97%

The two questions on the survey that generated the lowest average scores across the eight homes were as follows:

<b>Survey Question</b>	<b>Response Score</b>
I am satisfied with the quality of food and snacks.	82%
The physician responds in a timely manner regarding my medical care.	86%

Each individual home develops an action plan for any specific response area that falls below 80%. Action plans are developed in collaboration with families and residents and shared among the eight homes. Homes post the results of the Resident and Family Satisfaction Survey and the Action Plan on the Resident Information Board as well as on the Family Information Board. The results are also shared with Residents' Council and Family Council.

A number of improvement initiatives have been implemented to address the areas with lower outcomes. For example, in an effort to improve resident satisfaction with food, homes have improved the quality of protein products, especially breaded products, and homes are in the process of finalizing a new summer menu based on resident input. To

improve attending physician satisfaction some homes have started to book appointments between attending physicians and families to provide an opportunity to discuss concerns as families are not always in the home when physicians are scheduled to complete their rounds.

To augment the Satisfaction Survey, the LTC homes issue a number of 'point-in-time' surveys throughout the year. For example, meal surveys are completed with residents a number of times per year at the time of dining and immediately after a program or special event to ensure that audit results incorporate feedback from residents with potential memory deficits.

Staff will be initiating a review of the Satisfaction Survey Tool and survey process in collaboration with the Resident Family Advisory Council this summer to identify opportunities to improve survey response rates.

### **COVID-19 Seniors Services: Long-Term Care Homes**

COVID-19 poses a significant threat to the residents of LTC homes who are older and more medically complex than the general population, and therefore are more susceptible to infection from COVID-19. A number of risk mitigation measures have been put in place across the Region's long-term care homes in line with Ministry of Health, Ministry of Long-Term Care and Public Health direction to support the safety of residents and staff. The Seniors Services safety and risk mitigation strategy is based on an underlying principle of ensuring an abundance of caution, often above minimum requirements.

Measures that have been implemented to support the prevention of COVID-19 in Q1 and into Q2 include:

- All homes are closed to visitors at this time (with the exception of end-of-life compassionate visits).
- All staff are actively screened when they come into the home at the beginning of their shift and when they leave the home at the end of their shift. The active screening includes, in person interviews, and taking each employee's temperature. Staff who have a symptom or who have been exposed to someone with COVID-19 are tested and go into self-isolation. All staff are also self-monitoring throughout their shift and if they begin to feel unwell or develop a symptom are required to immediately leave and contact Public Health for testing.
- All staff are working only at a single home at this time.

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- Each employee in the home wears a surgical mask at all times when they are at work. When staff provide care for a resident in isolation they wear a mask (surgical or N95 depending on the type of care), a gown, gloves and a face shield. Regional homes have sufficient supplies of Personal Protective Equipment (PPE) to ensure that staff have the necessary products available for them at all times.
  - All residents are screened twice daily for symptoms, in addition to ongoing heightened surveillance of residents throughout all shifts. If a resident has a symptom associated with COVID 19, they are isolated and tested. If a resident is transferred from hospital, they are tested prior to transfer, only transferred if test results are negative and within 24 hours of the negative test result. A negative result does not rule out the potential for incubating illness and as such all new and returning residents must remain in isolation under Droplet and Contact Precautions for the 14-day period following arrival.
  - Dining areas and lounges have been reorganized to support social distancing. Furniture such as sofas have been removed (where required) and replaced with chairs that are placed at an appropriate distance apart. Dining areas have been reconfigured to ensure social distancing. Residents who are in isolation but prone to wandering have been assigned one-to-one support to ensure that if they wander from their room they are maintaining physical distancing at all times.
  - Enhanced environmental cleaning continues with additional housekeeping shifts and with increased frequency of cleaning and disinfecting 'high touch' surfaces.
  - All food and product deliveries are dropped off in an identified area in the parking lot and all deliveries are disinfected prior to being brought into the homes.
  - Communication plans have been implemented to support resident interaction with families through means such as phone calls, Skype or FaceTime. Recreation and social work staff are focused on ensuring residents have access to the supports they need through these challenging times.
  - All staff have had refresher training and updates on respiratory outbreak management, hand hygiene, appropriate use of personal protective equipment and on all aspects of COVID-19, and related care and risk management implications.
  - Extra staffing hours have been added to ensure residents receive the care they require.
  - Redeployed Regional staff are providing support with screening of staff and essential visitors, as well as providing support with dietary, housekeeping and laundry services.
  - Joint Occupational Health and Safety Co-Chairs complete a daily COVID-19 Spot Check Report.

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- Joint Occupational Health and Safety Co-Chairs reviewed and signed off on a COVID-19 specific Risk Assessment that details health and safety control measures by category including engineering controls, administrative controls and PPE with corresponding measures to mitigate transmission of infection in each domain.
  - Daily calls with the leadership teams and daily written summaries detail the updated implementation requirements for new and / or revised directives and orders from Ontario Health, the Ministry of Long-Term Care, the Ministry of Health, the Ministry of Labour, Public Health Ontario and Niagara Region Public Health.

### Next Steps

Into Q2 Seniors Services will be continuing precautionary safety measures as well as initiating a recovery plan and preparation for a possible second wave of COVID-19 in the fall.

### COVID-19 Seniors Services: Community Programs

In March, the Adult Day Program and Wellness programs were suspended and impacted staff were redeployed to the long-term care homes and Deer Park Suites Assisted Living. The redeployed staff are supporting communication between residents and families (FaceTime, Skype, phone calls) as well as mealtime assistance.

Respite companions have been redeployed and are providing telephone support to clients and families in the community. The phone calls enable a check in with isolated or vulnerable seniors in the community to make sure they are safe and well and provide a social connection to mitigate feelings of loneliness.

Outreach and Respite Program staff have been redeployed to support two community launches in an effort to mitigate risk for vulnerable seniors:

- ***Niagara, we're in this together*** is a multi-agency, community collaboration to address essential needs of vulnerable older adults across Niagara. Through this program, community workers complete wellness checks and assist seniors to secure essential needs including on-line grocery ordering, grocery delivery services, meal services, essential transportation access, and medication access.
- **Niagara Gatekeepers** launched an awareness campaign to advertise the number to call when supports are needed to connect seniors with food access programs, medication access, other essential needs, and transportation to essential appointments.

### **Next Steps**

Into Q2 Community Programs staff will continue to focus on supporting vulnerable seniors in the community and developing programs in response to the anticipated 'new normal' of the pandemic and potential second wave of COVID-19 in the fall.

### **Alternatives Reviewed**

Not Applicable.

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

Healthy and Vibrant Community.

### **Other Pertinent Reports**

None.

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#### **Submitted by:**

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

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## **Appendices**

Appendix 1

Seniors Services Report Card

## Appendix 1

## Seniors Services Report Card 2020

Measures	Definition	2019 Q2	2019 Q3	2019 Q4	2020 Q1
<b>Seniors Long Term Care Home Metrics</b>					
<b>Resident Satisfaction Survey</b>	This metric provides a measure of resident perception of services and overall rating of a great place to live. The survey is issued annually. In 2019 the average for the eight Niagara Region LTC Homes was 95%. The 2019 MBN average for upper-tier municipalities was 93%.				94
<b>Pressure Ulcers</b>	This is a measure of the number of residents with worsened stage 2-4 pressure ulcers (i.e. the stage of pressure ulcer is greater on the target assessment than on the prior assessment) (prov. avg. 2.6%).	3.73	3.25	2.96	2.91
<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 (In 2019 the total number of outbreaks was 16). <sup>i</sup>	2	4	3	6
<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. avg. 16.40%)	18.25	17.0	16.65	17.01
<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. The goal is to minimize all fractures. (prov. avg. 1.4%)	0.79	1.64	1.075	1.36



Measures	Definition	2019 Q2	2019 Q3	2019 Q4	2020 Q1
<b>Seniors Community Programs</b>					
<b>Number of unique individuals served in 2019-2020</b>	Individual is counted once in a calendar year regardless of the number of services one individual may be accessing.	1698	1748	1614	1611
<b>% satisfied with overall services</b>	Average across all Seniors Community Programs.				98
<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.	7	23	4	11

<sup>i</sup> In the event of COVID-19, Public Health will declare an outbreak if a single resident or staff test positive for COVID-19. One of the six outbreaks in Q1 was a COVID-19 outbreak. One employee developed symptoms and tested positive for COVID-19. There was no spread of the virus to residents or staff in the home.