

Long-Term Care Quality Assessment - 2017

Please Select Your Health Region:

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| <input type="checkbox"/> Athabasca | <input type="checkbox"/> Five Hills | <input type="checkbox"/> Heartland |
| <input type="checkbox"/> Cypress | <input type="checkbox"/> Kelsey Trail | <input type="checkbox"/> Mamawetan Churchill River |
| <input type="checkbox"/> Keewatin Yatthe | <input type="checkbox"/> Prince Albert Parkland | <input checked="" type="checkbox"/> Regina Qu'Appelle |
| <input type="checkbox"/> Prairie North | <input type="checkbox"/> Sun Country | <input type="checkbox"/> Sunrise |
| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Balcarres Integrated Care Center - 73005

Date of visit (DD/MM/YYYY): 31/07/2017

Please list those from the RHA that attended:

Karen Earnshaw, VP Integrated Health Services, PHC
Maggie Petrychyn, Executive Director, Rural PHC Services
Dan Drummond, Director, Touchwood Qu'Appelle, PHC Network
Jon Heathcote, Facility Manager
Lorie Mokolki, TWQ PHC Manager

Please describe what is working well as identified through your visit and discussions with residents and families:

- New Facility Manager started early July. His extensive PHC background will lend itself to further integration of the LTC and PHC team.
- Bright facility with large rooms.
- Access to nice outdoor space
- LTC Falls Program rolled out last year – continue to work on embedding the process
- Utilizing DVM including daily huddles and visibility wall.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Challenges with recruitment and retention of nursing staff – RN/ LPN and CCA.
- Limited access to quick response alternate level of care/ assessment services
- While residents feel overall the food is great – would like more choices
- Limited access to recreation on the weekends

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Work with all LTC teams to ensure MDS QI indicators are posted on the visibility wall. Teams are encouraged to discuss results to guide opportunities for improvements.
- Each site to review results from LTC Resident/ Family survey with teams with the lens of quality improvement. Once opportunities identified, work with available supports to develop and implement work plans.
- Continue to work with Nutrition and Food Services staff to look at ways to enhance the residents dining experience including implementing more choices throughout the menu.

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| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Broadview Centennial Lodge (BCL)

Date of visit (DD/MM/YYYY): 12/06/17

Please list those from the RHA that attended:

Karen Earnshaw, VP Integrated Health Services, PHC
Maggie Petrychyn, Executive Director, Rural PHC Services
Jenifer Dominey, Director, Prairie East PHC Network
Tracy Shire, Facility Manager Whitewood Community Health Center
Emily Watson, Facility Manager, BCL

Please describe what is working well as identified through your visit and discussions with residents and families:

- Bright well maintained facility.
- Good use of DVM with engaged staff.
- Resident feedback - Good food and great care.
- New manager started today!
- Great support from local Foundation.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Working with the team to enhance resident dining experience. Suzy Q cart received but still having challenges integrating into flow due to smaller dining room.
- Physical repairs to activity area required in order for residents to be able to go outside. Funding for new door split between Community Foundation and Facility.
- Older well kept building but requiring infrastructure upgrades soon (eg. Sidewalks around building deteriorating)

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Work with all LTC teams to ensure MDS QI indicators are posted on the visibility wall. Teams are encouraged to discuss results to guide opportunities for improvements.
- Each site to review results from LTC Resident/ Family survey with teams with the lens of quality improvement. Once opportunities identified, work with available supports to develop and implement work plans.
- Continue to work with Nutrition and Food Services staff to look at ways to enhance the residents dining experience including implementing more choices throughout the menu.

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| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Cupar & District Nursing Home

Date of visit (DD/MM/YYYY): 28/07/2017

Please list those from the RHA that attended: Michael Redenbach; Dan Kohl

Attended the Resident/Family Council meeting (20 people including 7 residents).

Please describe what is working well as identified through your visit and discussions with residents and families:

- Home received accreditation status from Accreditation Canada – now working towards any follow ups.
- Safety – all staff are trained in TLR and completing audits; completing environmental room audits and fixing any issues; incident reports are receiving appropriate follow up.
- Home now has information monitors in the dining area near the front entrance – provide information for visitors on hand hygiene, other safety information, and donation information/campaigns.
- Home announced an increase in recreation hours in the weekday evenings starting August 1st (additional investment funding from RQHR).
- Annual resident /family picnic was very well received.
- Resident/family comments – “kitchen staff and food are fantastic”; “I’m happy here”; “I want to get these legs working again but it’s not happening” (PT access issue in rural); “this is the most awesome place”.
- Comments from staff – wonderful new outdoor patio area and gazebo; positive results from the provincial resident and family surveys; Cupar is doing well regarding provincial QI’s (not triggering any negative QI’s for past two quarters); good supportive Board.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Home has struggled with outbreaks this past year both in number and duration.
- Comments from staff – recruitment is difficult in rural; resident transportation is an issue (costly for appointments especially if needing a paid companion); transportation also affects attendance at the adult day support program.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Infection control practitioners and Population Public Health are assisting the home with strategies to manage outbreaks. Infection control audits are now in place to try and mitigate outbreaks and their duration. Additional hand hygiene stations and the information monitors for visitors have helped.

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Facility Name and Number: Echo Lodge

Date of visit (DD/MM/YYYY): 31/07/2017

Please list those from the RHA that attended:

Keith Dewar, CEO, RQHR
Karen Earnshaw, VP Integrated Health Services, PHC
Maggie Petrychyn, Executive Director, Rural PHC Services
Dan Drummond, Director, Touchwood Qu'Appelle, PHC Network
Sandra Barrie, Facility Manager

Please describe what is working well as identified through your visit and discussions with residents and families:

- New Facility Manager started in June.
- Access to beautiful secure outdoor space (although could use upgrades to the cement).
- Great support from volunteers – fund paratransit bus, maintain local outdoor garden
- LTC Falls Program rolled out last year – continue to work on embedding the process
- Utilizing DVM including daily huddles and visibility wall.
- Active resident council
- Have made great progress on enhanced dining, relaxed breakfast and integrating choices. Recent changes made to support better flow between the departments and residents during meal times.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Challenges with recruitment and retention of nursing staff – RN/ LPN and CCA.
- Older building with many functional and infrastructure challenges

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Work with all LTC teams to ensure MDS QI indicators are posted on the visibility wall. Teams are encouraged to discuss results to guide opportunities for improvements.
- Each site to review results from LTC Resident/ Family survey with teams with the lens of quality improvement. Once opportunities identified, work with available supports to develop and implement work plans.

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Facility Name Extencicare Elmview
and Number:

Date of visit (DD/MM/YYYY): 06/09/2017

Please list those from the RHA that attended:

Keith Dewar, Michael Redenbach; Dan Kohl

Toured the Quick Response Unit and LTC area before attending an informal gathering with residents, Resident Council representatives, and Family Advisory Committee members (12 people including 10 residents).

Please describe what is working well as identified through your visit and discussions with residents and families:

- The Quick Response Unit – working very well serving referrals from hospital and community supporting patient flow in the RQHR.
- 6+ years of staff working injury free – management team works hard to support staff/resident safety and the home has strict adherence to safety policies including suspension for staff that violate.
- Comments from residents – “staff are wonderful and they look after you real well here, treat you good!”; “lots of activities”; “food is very good, really something”; “I’m making lots of friends here!”
- Any concerns are answered immediately.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- “Why is there not more than one bath per week?”
- “Better organization is needed around daily living – e.g. who is coming and going into the building – perhaps a sign-in sheet could be used.” Elmview management is considering this suggestion.
- Waiting time after a call button is used is an issue at times. Elmview staff following up with the resident.
- “Like to see more therapies in LTC for walking assists – I would like to walk twice per day.”

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- The RQHR approved additional funding for care and recreation staff – implemented effective September 1st.

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| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Extencicare Parkside

Date of visit (DD/MM/YYYY): 06/09/2017

Please list those from the RHA that attended:

Keith Dewar, Michael Redenbach; Dan Kohl

Met with the Administrator and toured the home.

Please describe what is working well as identified through your visit and discussions with residents and families:

- Parkside is piloting a new meal system for Extencicare Canada called menu stream – allows for a longer meal time with fresh food resulting in more flexibility for residents.
- Preparations are well underway for the next Accreditation Canada survey this fall.
- Parkside received two Extencicare Excellence Awards – maximizing physical function and care of residents with depression.
-

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Infrastructure is the main issue facing this home, especially relating to four bed wards and the associated issues with infection control in this environment.
- Storage space is also an issue – trying to install more ceiling track lifts to free up space/clutter.
- Care staff ratios are a concern, especially due to a significant number of admissions to first available bed.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- RQHR approved additional care staff effective September 1st – Parkside has hired additional CCAs, Resident Care Coordinators for evenings, and more recreation staff for evening programming.

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Facility Name and Number: Extencicare Sunset

Date of visit (DD/MM/YYYY): 18/09/2017

Please list those from the RHA that attended: Michael Redenbach; Dan Kohl

Tour of the home with a profile on the various visibility walls and conversation with a few residents and staff.

Please describe what is working well as identified through your visit and discussions with residents and families:

- Resident/Family Council meets quarterly but the home has a visibility wall dedicated to residents and families. They use this for educating families on care processes like infection control and the upcoming accreditation.
- Home has both a staff appreciation board where anyone can post a note and a bouquet board where they post cards/letters of thanks. These are a great idea and well received.
- Each department has daily huddles with staff and all staff attend a weekly wall walk to discuss charting, clinical issues like TLR and Hand Hygiene, plus one main QI focus (currently targeting resident falls).
- Resident comments: "very good place"; "staff are excellent – visible"; "I like it here – they're doing a pretty good job".
- Extencicare homes share call between all senior leaders (allows for a 1:8 weekly call rotation).

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Infrastructure and clutter continue to be an issue – old building, crowded spaces, and few areas to have privacy.
- Process for concern handling is an issue. Home is working with the Region on this.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Sunset received additional staff for care and recreation effective September 1st.

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| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Golden Prairie – Indian Head

Date of visit (DD/MM/YYYY): 31/07/2017

Please list those from the RHA that attended:

Keith Dewar, CEO, RQHR
Karen Earnshaw, VP Integrated Health Services, PHC
Maggie Petrychyn, Executive Director, Rural PHC Services
Devin Bueckert, Facility Manager

Please describe what is working well as identified through your visit and discussions with residents and families:

- Warm, inviting main entrance.
- Access to beautiful secure outdoor space with recent upgrades including raised garden beds and lighting.
- Great support from volunteers and local Trust Committee
- Utilizing DVM including daily huddles and visibility wall.
- Engaging recreation department offering variety of programming!
- Have made great progress on enhanced dining, relaxed breakfast and integrating choices.
- Staffing starting to stabilize.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Older well kept building –with some recent upgrades including new phone system and dining room and nursing station renovations
- Local team identified issue with increased noise related to call bells; piloting project using 2 way radios to minimize.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Work with all LTC teams to ensure MDS QI indicators are posted on the visibility wall. Teams are encouraged to discuss results to guide opportunities for improvements.
- Each site to review results from LTC Resident/ Family survey with teams with the lens of quality improvement. Once opportunities identified, work with available supports to develop and implement work plans.

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| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Grenfell Pioneer Home (GPH)

Date of visit (DD/MM/YYYY): 12/06/17

Please list those from the RHA that attended:

Karen Earnshaw, VP Integrated Health Services, PHC
Maggie Petrychyn, Executive Director, Rural PHC Services

Please describe what is working well as identified through your visit and discussions with residents and families:

- Great supportive staff.
- Enhanced dining implemented.
- Variety in recreation program – relaxed atmosphere and personal attention.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Infrastructure challenges affect all aspects of care and quality of life.
- Building is in urgent need of repairs. Staff in need of stability – dedicated managers and sense of future required in order to work to fullest capacity.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Work with all LTC teams to ensure MDS QI indicators are posted on the visibility wall. Teams are encouraged to discuss results to guide opportunities for improvements.
- Each site to review results from LTC Resident/ Family survey with teams with the lens of quality improvement. Once opportunities identified, work with available supports to develop and implement work plans.

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Facility Name and Number: Long Lake Valley Integrated Facility (LLVIF)

Date of visit (DD/MM/YYYY): August 21/17

Please list those from the RHA that attended:

Karen Earnshaw, VP Integrated Health Services, PHC
Maggie Petrychyn, Executive Director, Rural PHC Services
Karen Abrey, Facility Manager

Please describe what is working well as identified through your visit and discussions with residents and families:

- New head Cook – has made great strides in progressing enhanced dining experience.
- Extensive Kanban system rolled out to most areas!
- Good support/partnership with SHR for physician/NP.
- Great outdoor physical space; consistent upgrades to building (paint, etc.)

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Staffing challenges – increased turnover due to retirements
- Well kept building but is needing some upgrades to kitchen - flooring wearing; cooler; dishwasher
- Challenges with recruitment and retention. Anticipating upcoming issues with professional nursing. Young staff requiring lots of mentoring and support.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Work with all LTC teams to ensure MDS QI indicators are posted on the visibility wall. Teams are encouraged to discuss results to guide opportunities for improvements.
 - Each site to review results from LTC Resident/ Family survey with teams with the lens of quality improvement. Once opportunities identified, work with available supports to develop and implement work plans.
 - Continue to work with Nutrition and Food Services staff to look at ways to enhance the residents dining experience including implementing more choices throughout the menu.
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Facility Name and Number: Lumsden & District Heritage Home

Date of visit (DD/MM/YYYY): 02/08/2017

Please list those from the RHA that attended: Michael Redenbach; Dan Kohl

Attended the "Courtyard Conversations session with residents/families (15 people including 10 residents).

Please describe what is working well as identified through your visit and discussions with residents and families:

- Very positive resident and family survey results, including 100% of respondents feel it is a good place to live!
- Round table comments – "thank you for coming and listening"; "do a spectacular job!"; "Lumsden is the best home in the province".
- Local fundraising success to address small projects that enhance the life of the residents.
- Many local professionals offer services in Lumsden – the latest being an optometrist.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- One comment from the survey included "nothing to do evenings and weekends" (bored).
- Vacant spots in the adult day support program. RQHR will follow up.
- Lack of affordable rural transportation for resident to attend appointments or participate in outings.
- Home announced that their Auxiliary has now disbanded but they are hopeful that another group of volunteers will form and re-invent this area.
- Routine lab service is working fine but problematic if their regular visit day falls on a statutory holiday or in the event of bad weather (i.e. they have to wait until their next scheduled visit).

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Home announced that there will be changes coming to recreation including additional programming 3 evenings per week and on weekends. This change is Lumsden's plan for the investment in additional staffing for LTC affiliates approved by the RQHR.

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Facility Name and Number: Montmartre Health Center

Date of visit (DD/MM/YYYY): 31/07/2017

Please list those from the RHA that attended:

Karen Earnshaw, VP Integrated Health Services, PHC
Maggie Petrychyn, Executive Director, Rural PHC Services
Sabrina Bovee, Facility Manager

Please describe what is working well as identified through your visit and discussions with residents and families:

- Access to beautiful secure outdoor space with recent upgrades including raised garden beds and lighting.
- Great support from volunteers and local Trust Committee
- Use of DVM evolving as relatively new manager engages team.
- Smaller wheelchair van donated from WRC – has filled a great need within the facility and community.
- Engaged resident council.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Well kept building; working on expanding outdoor space to ensure secure, safe space for residents.
- Significant challenges with recruitment and retention of RN/LPN, CCA, CLXT, and cooks.
- LTC Falls program rolled out a few months ago.....continues to work on embedding program within team.
- Enhanced Dining – smaller facility with kitchen right off dining room. Continue to work towards enhanced dining experience including offering choices.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Work with all LTC teams to ensure MDS QI indicators are posted on the visibility wall. Teams are encouraged to discuss results to guide opportunities for improvements.
- Each site to review results from LTC Resident/ Family survey with teams with the lens of quality improvement. Once opportunities identified, work with available supports to develop and implement work plans.

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Facility Name and Number: Regina Pioneer Village

Date of visit (DD/MM/YYYY): 01/11/2017

Please list those from the RHA that attended: Michael Redenbach (Vice President Integrated Health Services), Debbie Sinnett (Executive Director Long-term Care), Ngaire Woodroffe-Brown (Director of Care, Regina Pioneer Village), Tyler Campbell (Manager, Therapeutic Support Services). The 'tour' was devoted to attendance at the Resident and Family Advisory Council meeting.

This report is supplementary to the original CEO Tour report, dated September 25th.

Please describe what is working well as identified through your visit and discussions with residents and families:

Generally good satisfaction with care and services at Pioneer Village. "Very impressed" with recreational department, "they're fantastic". It was noted that there are lots of different types of outings. Comment was made about the new 'mindful meditation' service that is being offered on the hostel unit, which appears to be quite well-received. It was noted that the monthly newsletter serves as an effective communications tool.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

It was noted that, on some units, the early morning shift hand-over between staff can be a bit chaotic and noisy, with both the incoming staff and outgoing staff there at the same time. Some concern expressed about meals: sometimes diabetic meals are not provided; diabetic-friendly snacks not always available; sometimes hot meals are not delivered hot. Efforts being made with regard to hand hygiene and infection control were recognized – and noted that still require improvement.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care: Executive Director and Director of Care were present for the discussion and will be taking concerns back to the respective Managers.

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Facility Name and Number: Qu'Appelle House

Date of visit (DD/MM/YYYY): 20/06/2017

Please list those from the RHA that attended:

Michael Redenbach; Dan Kohl

Attended the Resident/Family Council meeting (27 people including 22 residents).

Please describe what is working well as identified through your visit and discussions with residents and families:

- Many positive comments from the previous meeting minutes that were read aloud.
- Accreditation update – 565 out of 605 LTC standards met (93.3%). RQHR given a stats sheet.
- During round table there were numerous positive comments – “hunky dory”, “this is the best place anyone could be at my time of life”, “so kind and thoughtful”, “it’s a joy to be here”, “food is excellent here and staff are exceptional”, “they do one heck of a good job – hold your head high and brag! – I’m lucky to be here – I mean it!”

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Concern over residents filling prescriptions themselves – reminded that the home has a pharmacy contract with College Avenue Drugs and they receive great service and many extras from that pharmacy.
- Residents/families don’t like the LTC fee increase.
- Food concerns – quantity of salt in canned soup versus homemade and more variety of fresh fruits and vegetables versus frozen/canned.
- Concern over the quality of towels – “they’re like sandpaper!”
- Concern with health care transformation and what will happen to their home – “will we be put out on the street? I can’t afford anywhere else!” RQHR shared what is known to date regarding transition to the Saskatchewan Health Authority.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- LTC fee increase – RQHR advised that the additional dollars are being reinvested into the RQHR LTC affiliates.
- Food – concerns will be passed along to the cooks.
- Laundry/Linen – Provincial Laundry Service manages the institutional linens – Qu'Appelle House Administrator to follow up with K-Bro.

Long-Term Care Quality Assessment - 2017

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| <input type="checkbox"/> Prairie North | <input type="checkbox"/> Sun Country | <input type="checkbox"/> Sunrise |
| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Regina Lutheran Home

Date of visit (DD/MM/YYYY): 19/09/2017

Please list those from the RHA that attended: Michael Redenbach; Dan Kohl

Tour home, met with Senior Leadership Team, and attended the Town Hall meeting (28 people including 12 residents).

Please describe what is working well as identified through your visit and discussions with residents and families:

- Staff attend daily huddles and weekly safety talks at the visibility wall.
- Provincial Quality Indicators – Regina Lutheran Home (RLH) meets or exceeds the majority of all provincial targets.
- Hand Hygiene compliance is 90% (not where they want to be at 100% but very good compared to other jurisdictions).
- Transparent presentation of funding, budget, and actual for 2017-18 was well received. Evaluation of Recreation Program completed and decision to increase recreation staff on evenings, weekends, and stat holidays effective late October.
- Hired hospital chaplaincy to provide service to residents.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Family relations with a few families advocating for systemic changes.
- Infrastructure issues with an aging building. The hot summer was very challenging for residents and staff.
-

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- RLH plans to submit air conditioning changes as part of the capital submission to the RQHR.
- RQHR provided additional care staff effective August 1st.

Long-Term Care Quality Assessment - 2017

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| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Santa Maria Senior Citizens Home

Date of visit (DD/MM/YYYY): 013/09/2017

Please list those from the RHA that attended:

Keith Dewar, Michael Redenbach; Dan Kohl

Attended the managers meeting to answer any questions of managers, toured the home, and spoke with some residents on the units.

Please describe what is working well as identified through your visit and discussions with residents and families:

- Daily tracking of various indicators (falls, skin integrity, sick leave, overtime, etc.) on issues with residents and staff.
- Number of issues from residents/families has diminished in the past few months.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Main concern facing residents is sufficient staffing to answer call bells, provide baths, etc. Santa Maria establishing resident/family focus groups to assist with improvement opportunities.
- Some issues with respite residents coming in with wounds – home to continue follow up with case manager/home care.
- Concern over the Restraint QI – struggling with terminology. RQHR MDS specialist to assist.
- Sick time and overtime issues due to tracking in payroll system.
- Turnover of staff and associated orientation time/cost is an issue.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- RQHR approved more staffing for the 2nd floor dementia unit effective April 1st plus additional staffing resources to address sick time and orientation relief costs effective August 1st.

Long-Term Care Quality Assessment - 2017

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| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Silver Heights Special Care Home (SHSCH)

Date of visit (DD/MM/YYYY): August 21/17

Please list those from the RHA that attended:

Karen Earnshaw, VP Integrated Health Services, PHC
Maggie Petrychyn, Executive Director, Rural PHC Services
Jana Duffield, Facility Manager

Please describe what is working well as identified through your visit and discussions with residents and families:

- DVM – evolving; visual cues for monitoring (safety crosses). Posting QI's.
- Enhance dining progressing - team has been working hard to improve the resident's experience.
- Increased services from PHC team – et PT/OT, dietitian
- Staff worked together to clean and re-landscape front entrance area; created a very welcoming space for residents and families to use!
- Looking forward to support from new Program Development Educator.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- LTC Falls Program rolled out – utilizing DVM to support embedding program.
- Challenges re: pharmacy support for new admissions (transfers from urban especially)
- Limited access to volunteers; looking at ways to enhance community partnerships to encourage volunteerism (eg. Schools)

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Work with all LTC teams to ensure MDS QI indicators are posted on the visibility wall. Teams are encouraged to discuss results to guide opportunities for improvements.
- Each site to review results from LTC Resident/ Family survey with teams with the lens of quality improvement. Once opportunities identified, work with available supports to develop and implement work plans.
- Continue to work with Nutrition and Food Services staff to look at ways to enhance the residents dining experience including implementing more choices throughout the menu.

Long-Term Care Quality Assessment - 2017

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Facility Name and Number: Southeast Integrated Care Centre (SEICC)

Date of visit (DD/MM/YYYY): 12/06/17

Please list those from the RHA that attended:

Karen Earnshaw, VP Integrated Health Services, PHC
Maggie Petrychyn, Executive Director, Rural PHC Services
Jenifer Dominey, Director, Prairie East PHC Network

Please describe what is working well as identified through your visit and discussions with residents and families:

- Residents feel has a very good activity department; glad to be "close to home".
- Nice physical space; well-kept and inviting
- Nice outdoor space which is accessible to everyone. Recent upgrade/ expansion to outdoor space to include covered area with BBQ
- Kanban system to Stores area; extended to include units. Increased workload to Stores staff due to recent move to new ordering system.
- Great support from Community and Moosomin Health Foundation.
- Physician services are stabilizing. PHC Physicians moved to MFPC
- Great use of DVM

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Working with Nutrition and Food Services to look at ways to progress enhanced dining experience.
- Resident feedback - \$20.00 flat fee in LTC should cover "better products" particularly toilet paper and other personal care products. Too much "prepackaged and prepared" food, for example "deli ham instead of baked ham that would lead to homemade soup etc. .

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Work with all LTC teams to ensure MDS QI indicators are posted on the visibility wall. Teams are encouraged to discuss results to guide opportunities for improvements.
- Each site to review results from LTC Resident/ Family survey with teams with the lens of quality improvement. Once opportunities identified, work with available supports to develop and implement work plans.
- Continue to work with Nutrition and Food Services staff to look at ways to enhance the residents dining experience including implementing more choices throughout the menu.

Long-Term Care Quality Assessment - 2017

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| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: St. Joseph's Integrated Care Centre (SJICC)

Date of visit (DD/MM/YYYY): August 21/17

Please list those from the RHA that attended:

Karen Earnshaw, VP Integrated Health Services, PHC
Maggie Petrychyn, Executive Director, Rural PHC Services
Donna Weiss, Acting Facility Manager

Please describe what is working well as identified through your visit and discussions with residents and families:

- DVM – re-engaging staff/team with daily huddles, etc.
- Relatively active Day Program – 1-2 residents/day.
- Even though formal LTC falls program not slated for October, team has already started applying the principles.
- Ambulatory Falls program rolled out to PHC team
- Great progress and implementation of enhanced dining program including offering of choices, etc.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Significant challenges with recruitment of nursing staff, cooks and recreation; limited relief.
- Former acute care facility – but staff have worked very hard to try to create a homelike environment.
- Large secure outdoor space – working on upgrades to enhance the space for residents.
- Main entrance – very institutional; team to look for ways to make more inviting and well defined entry way.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Work with all LTC teams to ensure MDS QI indicators are posted on the visibility wall. Teams are encouraged to discuss results to guide opportunities for improvements.
- Each site to review results from LTC Resident/ Family survey with teams with the lens of quality improvement. Once opportunities identified, work with available supports to develop and implement work plans.

Long-Term Care Quality Assessment - 2017

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| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Wascana Rehabilitation Centre – Extended Care and Veterans Program

Date of visit (DD/MM/YYYY): 06/09/2017

Please list those from the RHA that attended: Michael Redenbach, Vice President, attended meeting of Resident Council Partnership. Seven members of the resident care management team were in attendance. 14 residents and family members were in attendance.

Please describe what is working well as identified through your visit and discussions with residents and families:

- The grounds have been much improved (although further improvement is necessary). Mud-jacking helped level some of the sidewalks; some of the entrances have been better maintained.
- Resident barbecues were very successful and much enjoyed
- Many dietary/menu improvements were noted
- Quotes from residents: "wonderful care", "best place I've been", "recreation is great"
- Staff are very open to being advised of resident preferences

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Concern raised about contents of chicken noodle soup; residents would like ongoing dialogue with Food and Nutrition Services about menu choices (noting that improvements have been made)
- Smoke Room is closing at end of September. Although no concerns were raised about this particular decision, it was identified that more, and more accessible, designated smoking areas outside the building will be required. There is also a desire for better policing of the entrances, and the no smoking areas, where smokers often congregate.
- It was noted that the Courtyard is a very nice space but that it is not well maintained, and there were a lot of weeds.
- Additional physiotherapy time was requested, and a statement about desire for more staff in general; more staff in dining rooms during meal times.
- Some of the automatic doors are locked too early in the day; and some of the doors seem to malfunction a lot – inhibiting the independent movement of residents
- One resident indicated a desire to see Resident Care Coordinators only on weekdays, not on weekends. This was not necessarily a commonly held view.

Long-Term Care Quality Assessment - 2017

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| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Whitewood Community Health Centre (WCHC)

Date of visit (DD/MM/YYYY): 12/06/17

Please list those from the RHA that attended:

Karen Earnshaw, VP Integrated Health Services, PHC
Maggie Petrychyn, Executive Director, Rural PHC Services
Jenifer Dominey, Director, Prairie East PHC Network
Tracy Shire, Facility Manager
Jacqui Jeske, RCC

Please describe what is working well as identified through your visit and discussions with residents and families:

- Good activity department – engaging activities;
- Nice inviting physical space;
- Outdoor space – easily accessible (front and back).
- Making good strides on enhanced dining.
- Great engagement through DVM.
- Rolled out LTC falls prevention program, good uptake and buy in from staff.
- Great community and Trust Committee support.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Upcoming kitchen and dining room renovations to support enhanced dining experience.
- Working on renovations to nursing desk area.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Work with all LTC teams to ensure MDS QI indicators are posted on the visibility wall. Teams are encouraged to discuss results to guide opportunities for improvements.
- Each site to review results from LTC Resident/ Family survey with teams with the lens of quality improvement. Once opportunities identified, work with available supports to develop and implement work plans.
- Continue to work with Nutrition and Food Services staff to look at ways to enhance the residents dining experience including implementing more choices throughout the menu.

Long-Term Care Quality Assessment - 2017

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| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: William Booth Special Care Home

Date of visit (DD/MM/YYYY): 013/09/2017

Please list those from the RHA that attended: Keith Dewar, Michael Redenbach; Dan Kohl

Toured the home and talked to residents and managers

Please describe what is working well as identified through your visit and discussions with residents and families:

- Adult Day Support Program supports 42 clients daily (total of 100 clients in the program) and integrates the programming with LTC and Convalescent Care clients.
- Flow of patients to/from convalescent care and hospice is working well (nearly 500 admissions annually).
- Very good management of residents, staff, policies, and programs on all fronts – kudos to the managers and leadership.
- Staff huddles twice per day to ensure issues are communicated to both day and evening staff.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Concern with some of the RQHR infection control protocols – not resident centered. Further discussion to occur at the RQHR LTC Strategic Oversight Committee.
- Building infrastructure is an ongoing challenge but the building has been well maintained.
- Sufficient care staffing is an ongoing concern, especially with the number of admissions managed by William Booth.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- RQHR Approved additional care staffing effective August 1st.

Long-Term Care Quality Assessment - 2017

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| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Wolesey Memorial Integrated Care Centre (WMICC)

Date of visit (DD/MM/YYYY): June 12/17

Please list those from the RHA that attended:

Karen Earnshaw, VP Integrated Health Services, PHC
Maggie Petrychyn, Executive Director, Rural PHC Services
Doug Andrie, WMICC Facility Manager
Monica Langevin, WMICC Acute Care Manager

Please describe what is working well as identified through your visit and discussions with residents and families:

- Working to relocate the RCC's offices to the wings.
- New Manager working hard to engage team. Connecting LTC to acute through DVM/huddles.
- Nice outdoor space; enclosed area for residents on West Wing.
- Good food.
- PHC Center in acute care – work underway to further support integration of team.

Please describe areas for improvement as identified through your visit and discussions with residents and families:

- Utilizing DVM in LTC; ongoing work to engage staff to guide their daily work.
- Lots of opportunity to engage QI team to improve efficiencies of all departments.
- Falls Program rolled out – further work required to embed.
- Focused work needed on enhanced dining experience and supporting resident choice.

Please describe how the information gathered in this visit will be incorporated into your overall efforts to improve quality of care for residents and staff in long-term care:

- Work with all LTC teams to ensure MDS QI indicators are posted on the visibility wall. Teams are encouraged to discuss results to guide opportunities for improvements.
- Each site to review results from LTC Resident/ Family survey with teams with the lens of quality improvement. Once opportunities identified, work with available supports to develop and implement work plans.
- Continue to work with Nutrition and Food Services staff to look at ways to enhance the residents dining experience including implementing more choices throughout the menu.