

Report LTCR-SS-16-16

To: Chair Burley and Members of the Social Services Committee
From: Lynne Johnson, Director of Long Term Care
Meeting Date: November 9, 2016
Subject: **Health Quality Ontario – Canadian Institute for Health Information Health System Data**
Status: Recommendation adopted by Committee as presented per Resolution SSC89-16; Endorsed by County Council November 22, 2016 per Resolution CC147-16;

Recommendation

1. That Report LTCR-SS-16-16 regarding Health System Data be received for information.

Background

Health Quality Ontario (HQO) is an independent, provincial agency responsible to measure and report on the quality of publicly funded health care services in Ontario. The information provided on their website is refreshed annually and includes the following long-term care home specific indicators

1. Antipsychotic Medication Use
2. Pressure Ulcers
3. Falls
4. Physical Restraints

Canadian Institute for Health Information (CIHI) is an independent, national organization that provides essential information on Canada's health system. These nine indicators are publicly reported.

1. Antipsychotic Medication Use
2. Pressure Ulcers
3. Falls
4. Physical Restraints
5. Improved Physical Functioning
6. Worsened Physical Functioning
7. Worsened Depressive Mood

8. Experiencing Pain
9. Worsened Pain

Some of the reported categories have an immediate impact on the residents' quality of life and staff work to ensure that programs are in place to address deficiencies and support positive outcomes. Other categories are more difficult to work with as the information often reflects a changing resident population and general health decline.

Current public data is for the April 2014 - March 2015 reporting period and includes national, provincial and Local Health Integration Network (LHIN) comparisons.

Publicly Reported Indicators

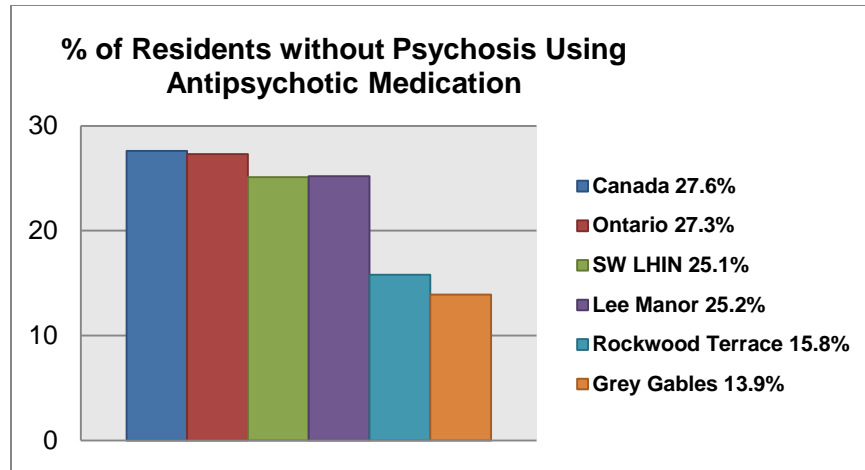
1. Use of Antipsychotic Medication without a Diagnosis of Psychosis

Antipsychotic medications are often used to treat psychosis, a term used to describe hallucinations and other behaviours that frequently occur in people with conditions such as schizophrenia and bipolar disorder. These medications may also be effective in relieving agitation and aggression in residents with dementia.

Quarterly medication reviews are completed by the consulting pharmacist. The results are reviewed by staff and provided to the physician along with any recommendations for changes.

In addition to the focus on medications, staff responsible to oversee the Behavioural Support Ontario (BSO) program within the home use their specialized knowledge to support the care of residents with responsive behaviours in a holistic way.

All three homes have had a positive downward trend in this area over the last two years. Both Grey Gables and Rockwood Terrace are rated among the top 50 homes in the province for this indicator.

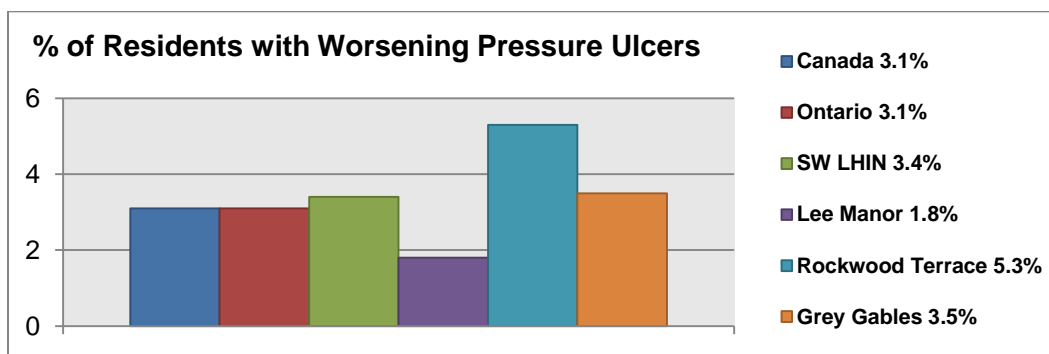


2. Residents with New or Worsening Pressure Ulcers

Frail people, those with incontinence, poor nutrition, mobility challenges, poor hydration or with a physical restraint are at an increased risk for skin breakdown.

Each of the homes has a wound care program that includes education on the importance of early recognition and intervention. Multidisciplinary team reviews all residents with wounds to ensure that the treatment plan is effective. The in-house wound care committee reviews data related to pressure ulcers to identify trends and opportunities for improvement, for example: the utilization of pressure reducing surfaces that minimize the risk of skin breakdown.

Rockwood Terrace has identified this indicator as a priority. Wound care program enhancements have been implemented and the home is seeing some positive results in this area. Staff are reviewing other options to target additional improvements.



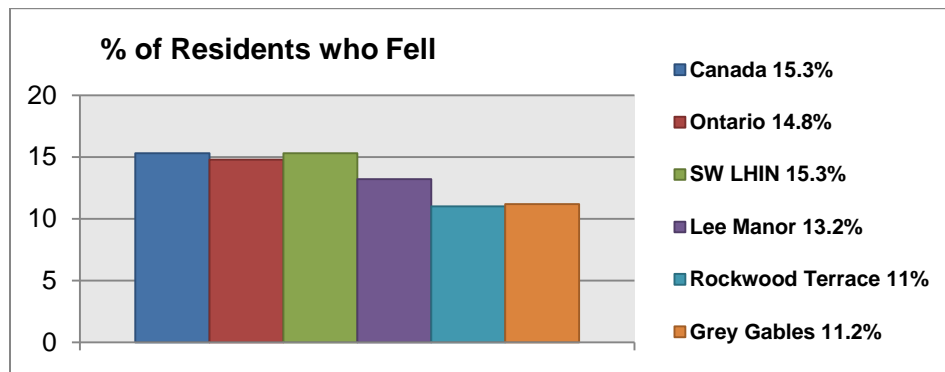
3. Residents with Falls

Weak muscles, poor vision, decreased sensation and side effects from prescription medication are some of the reasons an elderly person may have a higher risk of falling. Homes track the number of residents who fall, the number who incur more than one fall and injuries as a result of falls.

Independence and mobility is a high priority for many residents. It can be challenging to balance the risk of falling with a person's right to choose independent living.

Lee Manor has identified this area as a focus for improvement in 2016-2017. Residents who are at a high risk for falling participate in an exercise program focusing on improving strength and balance. Initial evaluations show a reduction in falls for the residents participating in the program.

The following chart shows the percentage of residents, who fell in the 30 days leading up to the date of their quarterly clinical assessment.

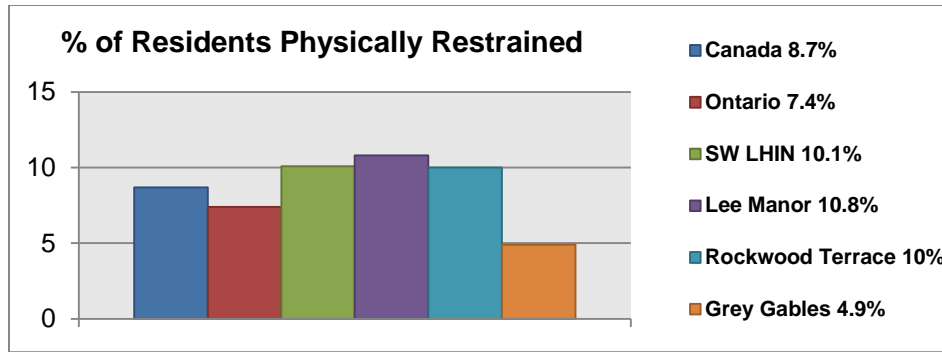


4. *Physical Restraints*

Physical restraints include items such as lap belts, table tops, bed rails and locked doors. Before a restraint is used, consultation with the resident, family and care team must occur to ensure a risk is present. It is also an opportunity to identify any alternatives that can prevent the need for a restraint.

Staff work with the Occupational Therapist to assess and ensure the appropriateness of table tops and restraint belts. The homes continue to replace old style beds with "hi-lo" beds through capital purchasing. By being able to lower the bed to the floor and use a fall-out mattress, the use of side rails as a restraint is eliminated and the potential for bed entrapment reduced.

Grey Gables has experienced a positive decline in the use of restraints over the past two years.

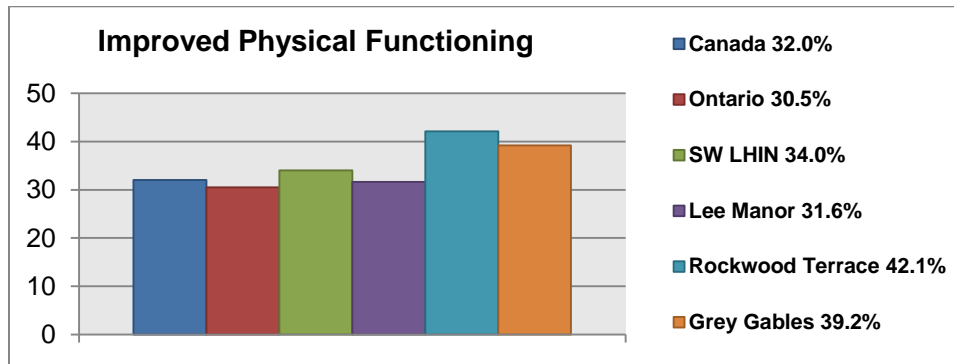


5. Improved Physical Functioning

Activities of daily living (ADL's) include eating, dressing, mobility and toileting. Residents who are independent or show an improvement with ADLs may experience improvement in their cognition, sense of purpose, quality of sleep and overall quality of life.

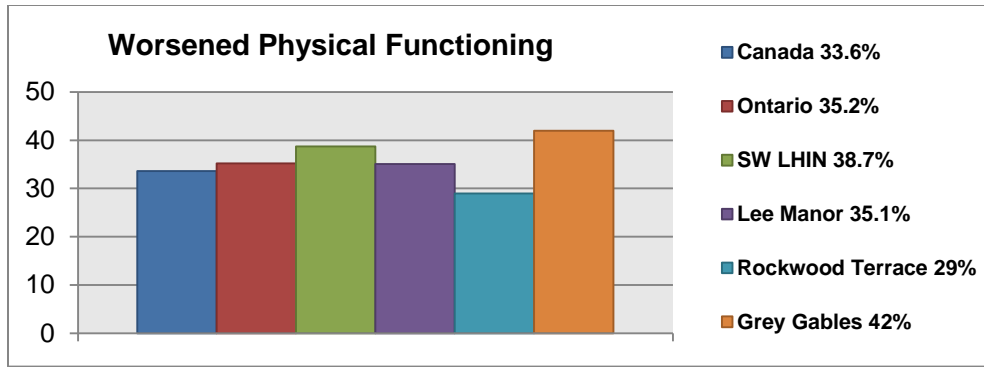
Our homes have Restorative Nursing Programs that focus on maintaining and improving the ADLs to prevent or slow a decline where possible.

With this indicator, a higher percentage is a better outcome and Rockwood Terrace rates among the best 25 homes in the province.



6. Worsened Physical Functioning

This represents the percentage of residents whose ADL's worsened or those who remained completely dependent when compared to their previous assessment. This indicator is difficult to effectively manage. With each quarterly review all residents are assessed in an attempt to identify opportunities for an improvement in physical functioning.

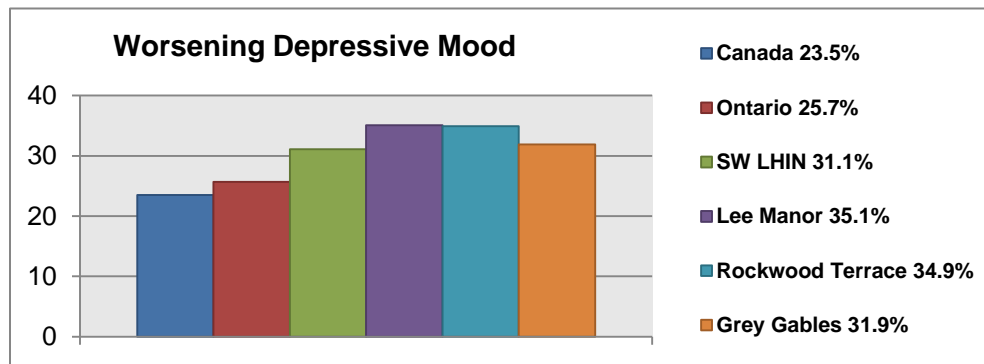


7. Worsening Depressive Mood

Residing in a long term care home may be a difficult and challenging transition. There are often feelings of loss of independence; loss of loved ones; loss of own home or other loss. Depression affects the quality of life and may also contribute to deterioration in activities of daily living (ADLs) and an increased sensitivity to pain.

We strive to provide a culture of comfort, safety, and autonomy for the residents and provide a supportive environment to empower residents to meet their own personal goals.

This indicator shows the percentage of residents whose mood due to symptoms of depression has worsened. Both Lee Manor and Grey Gables had a reduction in this indicator, over the past two years, which is moving them in the right direction.

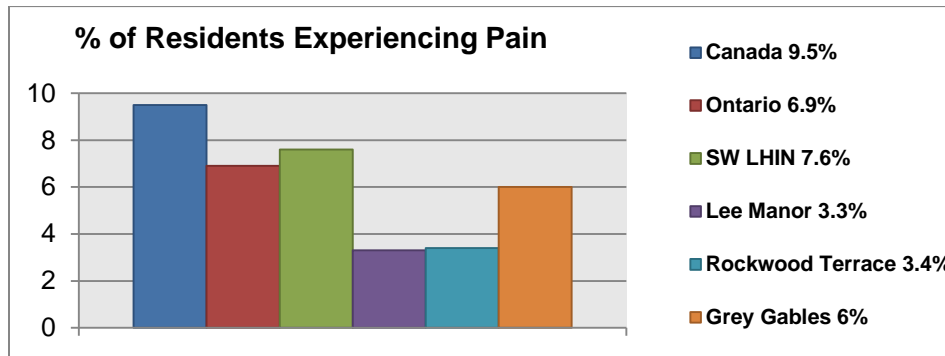


8. Residents Experiencing Pain

The consequences of pain include increased difficulty with activities of daily living (ADLs), depression and lower quality of life. The incidence of persistent pain increases with age, and adequate pain treatment can improve a person's overall health status.

Pain management within our homes is a priority as staff work to ensure that a variety of pharmacological and non-pharmacological interventions are in place to address individual needs.

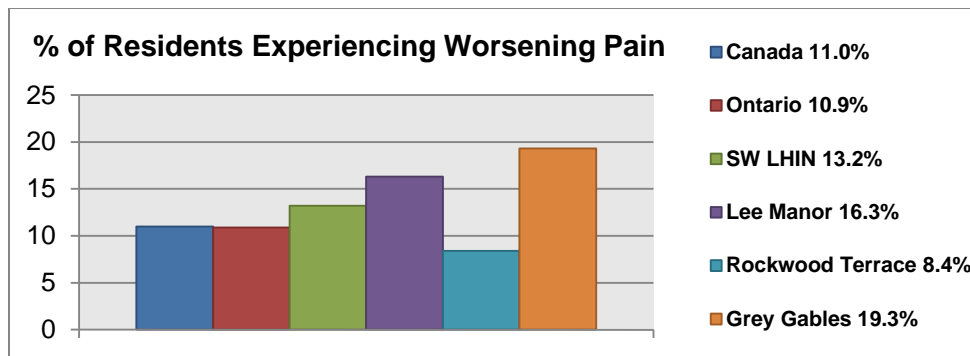
The Experiencing Pain indicator shows the percentage of residents who experienced pain during their assessment period.



9. *Worsened Pain*

Pain is subjective and refers to any type of physical pain or discomfort in any part of the body. It can be chronic, acute, intermittent or occur at rest or with movement.

This chart identifies the % of residents that indicated they experienced pain that was worse than during their previous assessment.



Financial / Staffing / Legal / Information Technology Considerations

Quality indicators are used by the long-term care homes to develop and support various programs and services and identify areas of risk. They are also useful to gauge performance across the sector. The broad range of health databases, measurements and standards are also used with evidence-based reports and analyses to assist with decision-making.

Many underlying factors influence the various outcomes and while it is the aim to meet established thresholds, individual resident needs, desires and health status all need to be considered.

In addition to the public reported data, the homes track many related performance indicators on a monthly basis. Internal teams are responsible to review the data and recommend improvements or changes.

The Long Term Care Service Accountability Agreement and the Long Term Care Homes Act outline roles and responsibilities for a committee of management. Reporting from the homes to the committee is an important link in ensuring accountability and supporting open communication.

Link to Strategic Goals / Priorities

Goal 6 of the County of Grey Corporate Strategic Plan is “Achieving Excellence in Governance and Service”. By monitoring, evaluating and implementing action plans, resident quality of life and safety will be supported.

Respectfully submitted by,

Lynne Johnson

Director of Long Term Care