

To:	Chair Burley and Members of Committee of Management
Committee Date:	May 23, 2018
Subject / Report No:	LTCR-CM-16-18
Title:	Public Posting of Home Performance Levels
Prepared by:	Lynne Johnson, Director of Long Term Care
Reviewed by:	Kim Wingrove, Chief Administrative Officer
Lower Tier(s) Affected:	All Grey County
Status:	

Recommendation

- 1. That report LTCR-CM-16-18 on the Public Posting of Home Performance Levels be received for information.**

Executive Summary

The Ministry of Health and Long Term Care have made changes to the government public long term care (LTC) home finder site. Now, each home is given a performance level based on ministry assessments of LTC home data from inspections, Resident Assessment Instrument-Minimum Data Set (RAI-MDS) and other criteria.

The full metrics and weighting on which performance is based has not been shared in full with LTC operators which make it difficult to predict outcomes or respond to any specific concerns. This process fosters a culture of “being caught” rather than a culture of improvement.

Background and Discussion

The ministry has indicated they are using data from multiple sources to assess the performance level of a home. The matrix monitors and ranks more than 60 risk factors including:

- Compliance Data (resident quality inspections, complaints and critical incidents with areas of non-compliance)
- Quality Indicator Performance (i.e. pressure ulcers, pain, resident behaviour)
- Long Term Care Service Accountability Agreement Indicators (i.e.: injury resulting in transfer to hospital, medication incidents, infection control, alleged/actual abuse, restraints, falls, weight loss, continence care)
- Qualitative Data (high leadership turnover, reports from governmental bodies/agencies)

i.e. Fire Marshal, Ministry of Labour)

Homes are rated in one of four categories: “in good standing”, “improvement required”, “significant improvement required” or “license revoked”. The exact formula for ranking is unclear. We know that it is based on older information and does not capture many positive quality outcomes the homes have experienced in key clinical areas and the positive changes experienced in resident and family satisfaction rates. Homes have quality management programs in place that include audits, team meetings and evaluations. Additionally the homes investigate incidents, follow up on complaints and conduct satisfaction surveys.

The information was made public on April 13, 2018 based on data from December 2017. Lee Manor is “in good standing” while Grey Gables and Rockwood Terrace are listed as “improvement required”. Home specific information, as posted on the MOHLTC website, is provided at the end of this report.

Legal and Legislated Requirements

The Ministry has indicated that the results, which provide a snapshot of the home’s status, will be updated quarterly. In many cases the Ministry is not in the home on a quarterly basis which does not allow for current information to be reflected or an opportunity to gauge improvement. Our experience shows that when ministry inspectors visit, they follow up on items submitted over a number of months. This results in spikes and dips in information and does not reflect any corrective measures that have been implemented.

Within the long term care sector, there has always been a strong compliance focus and there has been a vast improvement in the provision of public information over the years. The changes in the MOHLTC website creates a challenge because posted information will be a “sound bite” that doesn’t tell the whole story, identify barriers, underlying challenges or show actions that have been taken to improve outcomes. The ministry will be holding webinar(s) in the late spring/early summer to assist homes to better understand how performance levels are determined.

The home performance level will be reviewed with staff and at Resident and Family Council meetings.

Financial and Resource Implications

Corporately, there is an increased need for more structured review and management of evaluative outcomes for quality improvement and risk management activities. The financial impact of this requirement is currently unknown. Staff will provide additional information when available.

Relevant Consultation

- Internal Administrators of Grey Gables, Lee Manor and Rockwood Terrace
- External (list)

Appendices and Attachments

Performance Level April 30, 2018 Grey Gables, Lee Manor, Rockwood Terrace as found on:

Ministry of Health and Long Term Care. Find Long Term Care Homes in Ontario. April 30, 2018.
<http://www.health.gov.on.ca/en/public/programs/ltc/home-finder.aspx>

Grey Gables

Inspection Information

Performance Level
Improvement required
 Several areas of concern identified by province; increasing number of complaints and incidents where residents are harmed or at risk of harm; home needs to take action to improve. Homes in this level may have recently improved their performance. The province continues to monitor.
 As of December 31, 2017.

Annual Inspections
 Resident Quality Inspection (RQI)
 Last RQI Inspection: December 13, 2017

	LTC Home	Provincial Average
Orders	2	0.61
Non-compliance	7	5.66

Targeted Inspections
 Inspecting Complaints, Critical Incidents & Others

	LTC Home	Provincial Average
Orders	0	0.52
Non-compliance	2	2.54
Number of Targeted Inspections	1	

Note: Performance Level and Annual Inspections data is updated approximately every three months. Performance Level is current as of December 31, 2017 and may have changed since then. Annual Inspections data is current as of March 31, 2018.

Lee Manor

Inspection Information

Performance Level
In good standing
 Acts to address areas of concern with provincial standards for resident care and home operations; reports incidents and corrects issues identified in high risk areas; generally manages complaints.
 As of December 31, 2017.

Annual Inspections
 Resident Quality Inspection (RQI)
 Last RQI Inspection: January 11, 2018

	LTC Home	Provincial Average
Orders	2	0.61
Non-compliance	6	5.66

Targeted Inspections
 Inspecting Complaints, Critical Incidents & Others

	LTC Home	Provincial Average
Orders	0	0.52
Non-compliance	2	2.54
Number of Targeted Inspections	1	

Note: Performance Level and Annual Inspections data is updated approximately every three months. Performance Level is current as of December 31, 2017 and may have changed since then. Annual Inspections data is current as of March 31, 2018.

Rockwood Terrace

Inspection Information

Performance Level
Improvement required
 Several areas of concern identified by province; increasing number of complaints and incidents where residents are harmed or at risk of harm; home needs to take action to improve. Homes in this level may have recently improved their performance. The province continues to monitor.
 As of December 31, 2017.

Annual Inspections
 Resident Quality Inspection (RQI)
 Last RQI Inspection: July 4, 2017

	LTC Home	Provincial Average
Orders	1	0.61
Non-compliance	7	5.66

Targeted Inspections
 Inspecting Complaints, Critical Incidents & Others

	LTC Home	Provincial Average
Orders	0	0.52
Non-compliance	0	2.54
Number of Targeted Inspections	0	

Note: Performance Level and Annual Inspections data is updated approximately every three months. Performance Level is current as of December 31, 2017 and may have changed since then. Annual Inspections data is current as of March 31, 2018.