



Lee Manor



Grey County Operations Report to Committee of Management Open Session

Submission Date: April 9, 2019

Information for the month of: March 2019

Financials

Financial analysis will be transitioned to Sienna Senior Living in 2019.

Scorecard: Quality

Publicly reported indicators – Q2 2018 (July – Sept 2018)

Indicates Better than Ontario Average
Indicates Worse than Ontario Average
Indicates Ontario Best Practice Target Reached
Indicates Sienna Target Reached

Indicator	HQO Best Practice	Ontario	Sienna Target	Sienna Average	Lee Manor
Worsened ADL	25%	33%		29.4%	39.4%
Worsened behavioural symptoms	8%	12.7%		11%	15.7%
Worsened mood from symptoms of depression	13%	23%		17.4%	38.5%
Has fallen	9%	16.4%	13.50%	16.6%	16%
Worsened stage 2 to 4 pressure ulcer	1%	2.7%	2%	2.2%	0.8%
Has a new stage 2 to 4 pressure ulcer	1%	2.2%		1.8%	0.7%
Daily physical restraints	3%	4.3%		0.9%	3.8%
Worsened bladder continence	12%	17.8%		15.7%	20.3%
Worsened pain	6%	9.9%	8%	7%	10.8%
Taken antipsychotics without a diagnosis of psychosis	25.3%	19.5%	20%	17.4%	20.5%
Improved or remained independent in mid-loss ADL	30.4%	29.2%		27.5%	35.3%
Has pain	7%	5.8%		2.4%	1.6%

Indicator results for the third quarter are expected soon. We will continue with the action plan that was developed in March 2018 to address performance and meet targets.

Ministry of Health and Long-Term Care (MOHLTC) Compliance Orders / Inspection Findings Summary

No Ministry of Health and Long-Term Care inspections this month.

Scorecard: People

Darlene Bowerman, PSW Coordinator, was asked to assist with teaching a portion the Gentle Persuasive Approach (GPA) course to Georgian College PSW students. This

provided an opportunity for the manager to meet with the new students and supported Darlene in fulfilling the requirements to maintain her GPA credentials.

There are currently student completing placements in two departments. There are 23 PSW students from Georgian College with 5 of them in working directly with a Lee Manor staff member as a preceptor for their final practicum. One Dietitian intern from Brescia University College is completing the 3-week management placement component with Shannon Cox, Nutrition Manager.

Lee Manor is participating in the MOHLTC funded Excellence in Resident Centred Care (ERCC) course. Four PSWs were trained as trainers through Conestoga College and are currently teaching the course in-house to PSWs. To date 57 of 83 PSWs have participated. The goal of the course is support better care and outcomes for the Residents.

Sienna Partner Visits

- Clinical Partner- March 1st webinar, Palliative Care
- Dietary and Nutritional Care Partner – March 12th onsite visit to review and implement policies and procedures and March 21st teleconference MDS Rai timelines
- Quality & Informatics Partner – March 21st, onsite visit, quality improvement activities
- Region 7 Executive Director/Administrator- March 28th monthly meeting via Skype and March 22nd Skype meeting with Grey County Administrators to review the Operational Plan
- Laundry and Housekeeping Partner – March 11th onsite visit to review policies and procedures, March 18th Networking teleconference
- Sienna Partner Resident Experience- March 4th and 20th teleconferences regarding policy and procedure review and March 22nd, Region 7 teleconference
- Bi-monthly Leadership webinar- March 20th
- Vice President of Operations- March 27th, site visit
- Introduction to CARF webinar- March 27th

Projects, Location Events and Other

St. Patrick's Day was in full swing at Lee Manor and celebrated with a festive party, live entertainment and theme craft activities. The 2 South nursing team "Coloured It" extra green for the occasion, arriving with festive hats and necklaces to show off their Irish spirit. They also helped residents pick out their favourite green apparel to join in the fun. The energy they created made it a special day for residents!

In March, there was a need to spring forward for Daylight Saving Time. Although only losing an hour, it can feel like an abrupt transition. In honour of the occasion, Lee Manor staff and residents hosted a pajama day. The participation was impressive and the conversations it sparked was entertaining for all!

Long Term Care

Occupancy

2019 Occupancy Data	Reporting Month	Year to Date
Occupancy	98.75%	98%
Move-Ins	6	17
Discharges	5	17

Regulatory visits i.e. Ministry of Labour, Public Health

Public Health Inspection- February 27. Two areas of deficiency:

- The dishwasher temperature failed to reach the required 180 degrees Fahrenheit for 10 seconds at the final rinse cycle.

NOTE: This is a brand-new dishwasher, purchased and installed in the fall of 2018. It meets National Sanitation Foundation (NSF) International Standards for a commercial dishwasher which allows for the plate to be 160 degrees Fahrenheit. The Ontario Food Premises Regulation under the Health Protection and Promotion Act regarding mechanical dishwashers indicate that the requirement for 180 degrees for 10 seconds does not apply to a mechanical dishwasher that bears a certification from NSF International which certifies it for commercial use. The Public Health Inspector left a finding for non-compliance and the above information regarding the dishwasher was provided to the inspector as follow-up. In a telephone conversation with the inspector on March 26th, the inspector verified that the information provided by the home has been confirmed as correct by the

manager at Public Health and the notice of deficiency will be corrected during the next visit.

- Food Handling – Fail to ensure the internal temperature of potentially hazardous food is 4°C or lower. At time of inspection some milk containers in a refrigerator in a resident kitchen server registered at 7°C. Five new refrigerators for Resident dining room serveries have been purchased and installed, as per the 2019 capital project. The temperatures are monitored by staff to ensure safe temperatures are maintained.

Occupational Health and Safety Issues

One outbreak during the month of March:

- Influenza A outbreak declared by Public Health on March 22.

The Infection Control Committee and Public Health worked closely together to ensure all measures to reduce the impact of the outbreak are in place and followed.

Emergency Preparedness and Environmental concerns (including emergency codes practiced)

Three fire drills were held during the month. Staff responded as required and education was provided to clarify the procedure.

Written and Verbal Complaints Summary

Type of Compliant	Summary	Outcome (s)
Verbal	Family complaint about staff behavior.	Investigation initiated
Verbal	Resident complaint related to care	Investigation completed, resolved

Compliments Summary

8 Verbal, 1 Written- Compliments were provided to the team in appreciation of the excellent care and service provided.

Resident and Family Satisfaction Survey

Survey results have been shared with Resident and Family Councils and with staff. Action plans are being developed as part of the Operational Plan and Quality Improvement Plan.

Resident/Family Council Updates

Resident Council was held on Thursday, March 7th and a new President and Vice President were elected for 2019.

The Family Council meets bi-monthly and did not meet during March.