

MAMAWETAN CHURCHILL RIVER REGIONAL HEALTH  
AUTHORITY

2014 LONG-TERM CARE QUALITY ASSESSMENTS

Personal and privileged information has been removed for the attached documents as per legislative requirements.

# Long-Term Care Quality Assessment

## Please Select Your Health Region:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Athabasca       | <input type="checkbox"/> Five Hills             | <input type="checkbox"/> Heartland                            |
| <input type="checkbox"/> Cypress         | <input type="checkbox"/> Kelsey Trail           | <input checked="" type="checkbox"/> Mamawetan Churchill River |
| <input type="checkbox"/> Keewatin Yatthe | <input type="checkbox"/> Prince Albert Parkland | <input 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:** La Ronge Health Centre

### 1. Facility Visit:

Date of visit (DD/MM/YYYY): 29/4/2014

Please list those from the RHA that attended. David Watts, Executive Director of Integrated Health; Katie O'Brien, LTC Coordinator

Please list the themes identified. Safety (Falls, Medication Errors); Visibility Wall Management; Attendance/Sick time; Physician Rounding

### 2. Resident/Family Council:

Is there a resident/family council? Yes  No

If no, when will a resident/family council be established? \_\_\_\_\_

If yes, how often do they meet? Quarterly

Please list the themes identified at the resident/family council meetings. Fall Safety--particularly equipment/supplies that families can purchase to help resident safety; process for referalls--physiotherapy, dental, speech language pathology, etc.

### 3. Action Plan:

Please describe the RHA Action Plans to address the themes identified in both the facility visit and discussions with resident/family councils. Use of visibility walls to track falls, medication errors, attendance/sick time  
Communication with physicians around processes for improved rounding  
Communication with families about resident needs and discussion about how to best meet them.