

Long-Term Care Quality Assessment - 2016

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 type="checkbox"/> Regina Qu'Appelle |
| <input type="checkbox"/> Prairie North | <input type="checkbox"/> Sun Country | <input checked="" type="checkbox"/> Sunrise |
| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Canora Gateway Lodge
73772

Date of visit (DD/MM/YYYY): 03/05/2016

Please list those from the RHA that attended: Bev Pacey, Director of LTC Central

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

The Canora Gateway Lodge is a welcoming facility with residents sitting near the entrance to see who is coming and going.

The facility looks and smells clean. There are plants growing under a grow light and there are a couple of pleasant, bright and airy sitting rooms for residents to be in if they want to be out of their rooms.

At lunch time the dining area was fairly quiet and smelled of wonderful food.

I was able to attend a resident council meeting where 12 residents attended. What is working well included:

- the rooms and common areas are very clean
- the food is very good
- the residents feel they can go to talk to the head nurse or the recreation staff if they ever have a concern
- The recreation staff provides a wonderful variety of activities and was thanked several times at the meeting. There is activity staff on 7 days a week.

I was able to attend a wall walk where all facility staff attended.

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

Areas for improvement:

- The dining room guidelines were talked about at the resident council meeting—the residents were happy to be getting hot fresh coffee, but the food is sometimes served before the resident is at the table. Some residents want smaller portions.
- The wait for call bells to be answered is very long at times.

Please describe how this 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 dining room guidelines will be followed to address individual resident needs such as portion sizes and not serving until the resident is at the table.
- Purposeful Interaction has been implemented in this facility, therefore, staff will be striving to meet the resident needs prior to them needing to utilize their call bells.
- Canora Gateway Lodge was the pilot area in the region for standardization for sling and lift safety checking. They have done an excellent job in implementing this consistently and now the process will be replicated throughout the region.

2016

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

Facility Name and Number: Esterhazy Centennial Special Care Home 73778

Date of visit (DD/MM/YYYY): 18/02/2016

Please list those from the RHA that attended: Joanne Bodnar, Director of Health Services North

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

I was able to attend a resident council meeting at which 20 residents and 1 family member were in attendance. They graciously welcomed me to the meeting. They are a very open and expressive group willing to share their thoughts and opinions.

They stated that

- "this was like coming home when I came here."
- "we get good care"
- "staff are kind and thoughtful".
- One who had transferred from one Sunrise facility to another stated "it's not much different living here than anywhere else" which I clarified that, yes, they thought the care was good at the other facility as well.
- They also noted that "they have to learn to get along with everyone" and verbalized that that this can be a challenge at times
- They appreciated being involved in the menu discussions held twice a year and being able have some of their own choices be part of the menu.
- They also expressed appreciation that someone representing the region was willing to come out and get their input

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

There were some suggestions for improvement made such as having larger room spaces but they also recognized that there is nothing that can be done about the physical space of the building

One resident would like the food to taste better while another suggested a better variety of vegetables. One resident was frustrated with some laundry that was lost some time ago and has yet to be found.

Several commented

- that there is need for more staff so they are not so rushed or that call lights sometimes wait to be answered.
- that some staff take much pride in their work while others not so much, but they know the manager is addressing this
- that some residents would like to have a bath more than just once a week
- that the increase in rent "has hit hard" for those on a limited income.

One very articulate resident stated "the best education for those making the rules should be that they have to live here for awhile and experience it!"

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

Facility Name Foam Lake Jubilee Home
and Number: 73786

Date of visit (DD/MM/YYYY): 30/05/2016

Please list those from the RHA that attended: Sharon Clark, Director of Health Services South

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

During this site visit I interviewed 3 residents (one is the Resident Council Chair, and the other two are resident council members). I also attended the Resident/Family Council Meeting.

This facility has a total of 51 beds that includes one respite and one palliative bed. The environment is a mix of old wings and one newer wing (that has larger rooms with private washrooms). The older wings have single rooms with a shared washroom between. Resident placement usually allows one resident to have a designated bathroom beside a resident who would not need the use of a bathroom.

- The resident's name is posted in large print on their room door; there were no resident pictures to identify the resident that resides in each room.
- The ability and choice to have a phone/TV/computer in their individual rooms, one resident uses skype regularly with family members and grandchildren.
- Facility manager is very receptive to concerns brought forward by resident council chairperson and it is felt that she deals with issues/concerns in a timely manner.
- Resident(s) interviewed feel that there is enough staff for this facility
- Recreational therapy programming does a great job and a lot of variety and options for residents (i.e. planned events and outings are a highlight for those residents who enjoy going to different places for coffee, visits, tours, entertainment, etc.)
- There is a Red Hat Club for female residents and an Escape Club for male residents. Each group has an assigned space for their club events and these spaces can also be used by families/residents for parties/family events.
- To communicate to all staff and visitors when it is a resident's birthday – a Cupcake with a candle is posted on the individual resident's door to indicate it is their Birthday!
- Ceiling track lifts in specific rooms has enhanced ability to safely transfer/mobilize residents with very limited mobility.

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

- Resident/Family Council Chairperson indicated that the other residents are afraid to speak up for fear of reprisal but they do feel comfortable bringing issues to her so that they can be taken forward. The resident council chairperson is a strong advocate for her fellow residents.
- Resident/Family Council Chairperson was concerned that residents were folding linen. She was not sure that they were washing their hands prior to this task or that they should even be folding linen that was going to be used by other residents.
- Election and Census information for cognitive residents wasn't communicated or shared with those residents

who could respond on their own. When asked why they hadn't received their census or election information they were told that recreation therapy had it all. It was sorted out in the end but cognitive residents felt that they should have been responsible for their own information and responses for the Census.

- Scents can be an issue for some individuals and there are still some residents/visitors/staff that tend to wear strong scented products when in the home.
- Laundry detergent currently being used for personal laundry has a strong scent/odor which impacts some residents with sensitivities.
- Residents have indicated that they would like real fruit juice rather than drink crystals, they do like the real cranberry juice that is provided for AM juice, but afternoon liquids are made from drink crystals.
- Resident/Family Council chair would like visitors to be educated on hand hygiene
- Not all staff should take their breaks at the same time as there have been times when a resident has required assistance and there has been no staff around to assist.
- There is a lot of clutter in rooms that have been re-allocated for general storage/recreation storage/family/resident visiting space, etc.

Please describe how this 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:

- Implement Purposeful Interaction
- Nursing break times to be pre-scheduled for each shift to ensure there is adequate staff on the floor at all times, in charge nursing staff to manage for evenings and nights
- Refer request for real juice to regional dietary services
- Discuss current scent free policy and procedure with staff and residents (upon admission), display signage for scent-free environments for visitors and family members.
- Infection Prevention and Control currently working on standardized signage for general public

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Facility Name and Number: Invermay Health Centre
73773

Date of visit (DD/MM/YYYY): 02/05/2016

Please list those from the RHA that attended: Suann Laurent, President and CEO

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

- Great hand hygiene compliance – 100%. Purposeful interaction is happening throughout the facility – great job – asking the 4 P's. Great communication at the wall walk. Great job on med reconciliation on Long Term Care – 100%.
- 593 days since last workplace incident – TLR drills done every month.
- Clean facility – residents like the food and state that staff treat them well.
- Attended Resident/Family Council Meeting – 14 residents present.
- Oma (dog) is well received by the residents.
- Great leadership at all levels of this facility – great staff engagement.
- Residents have choices of food and portion size. Members really like being involved in menu choices – they like getting pizzas and lasagna now. 2nd choice is always available.
- Residents like activities, spring teas, birthday parties, and entertainment.

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

- Name tags need to be worn by all staff members. Audits are being done.
- Residents would like to see their morning care slowed down in some instances.
- Flooring is an issue throughout building – Vendor has been notified and floors should be repaired/replaced on warranty as soon as possible.

Please describe how this 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:

- This site needs to develop correction action plans for wearing name tags.

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

Facility Name and Number: Ituna Pioneer Health Centre
73784

Date of visit (DD/MM/YYYY): 09/05/2016

Please list those from the RHA that attended: Suann Laurent, President and CEO

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

- Good team work. Clean environment.
- Good use of wall for communication when it is used – once a week at present.
- Resident Council in place – family members in attendance.
- Meals are noted to be good by the residents. Choices are available for residents at meal time.
Happy the roof got fixed, 4 rooms were out of service.

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

- Residents feel meal portions are too big.
- MDS system needs to be enlarged on application.
- Sewage/water leaks – old infrastructure.
- X-ray - old processor in Ituna – machine is breaking down.
- Not all doors open by a push opener for dining room door.
- Cracked nursing station – needs painting as well.
- Old taps in all residents' rooms - can't turn on and off easily – need replacement.
- Cement area outside of dining room door is not safe for residents to come out – uneven and cracked.
- All staff need to wear name tags.
- Housekeeping staff feels they need more staff especially for health centre.
- Need to have daily visual management – huddles everyday assigned to staff.
- Restraint use is high in this site and needs to be reviewed and addressed.
- Residents would like activity department available on the weekends.

Please describe how this 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:

- Action plans will be put in place to address this work, both locally and themed up in the region.

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Facility Name and Number: Kamsack Nursing Home
73769

Date of visit (DD/MM/YYYY): 05/05/2016

Please list those from the RHA that attended: Bev Pacey, Director LTC Central

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

When I arrived at the LTC facility there was new signage making it very easy to find the entrance to the LTC facility. There was a welcome sign with the manager's name and picture on the front door. There is a large lounge at the front and several welcoming sitting areas around the facility. Somebody has a green thumb as there are lots of healthy looking house plants around the building. There is an enclosed courtyard with a gazebo. There is a ladies auxiliary that fundraises for the "extras" in the facility. When I came in there was 2 staff walking a resident and sounding happy. All staff was wearing name tags. All equipment in the hallways was to one side. I met with 7 residents and 2 family members. The activity department was praised—there are some activities on weekends. Medical and nursing care is very good. One resident that I had met on a previous visit had much improved pain control. One lady had chosen to remain in this nursing home rather than return to her preferred location.

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

- The main concerns were about food—too many beans and carrots, more salads requested, receiving food when it was on their card that they were not to receive it, all dietary staff may not understand the dietary requirements of each resident.
- There was times when the waits for call bells being answered were too long.
- Unable to have control over belongings—size of the room limits what furniture can come into the care home and laundry going missing.

Please describe how this 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:

- Individualized food preferences—continue with dietary focus groups, meet with individuals to review the menu items, watch dietary waste audits. Remind individuals to speak up if the food they receive is not satisfactory or they do not think they can tolerate it as there should be an alternate available.
- Long waits for call bells to be answered—continued improvement of purposeful interaction to try to address care needs proactively.
- Care conferences as required to address concerns—the younger residents in LTC need to be given special attention as they have a difficult time adjusting to living in LTC.

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Facility Name and Number: Langenburg Centennial Special Care Home
73779

Date of visit (DD/MM/YYYY): 19/05/2016

Please list those from the RHA that attended: Suann Laurent, President and CEO

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

- Good job at the wall walk – great communication.
- Celebrating 40th year anniversary this year.
- Celebrating successes – training on Program Guidelines for Special-care Homes
- Talking about stop the line – great to see on the ground.
- Nice clean facility.
- Active Resident Council Committee in place.
- Residents like the food, bus rides, and programming.
- Recreation board is excellent to recognize staff and then draw names for prizes for giving shout out to each other. Recreation therapy staff very engaged and caring.

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

- Everyone needs to wear to name tags.
- Need more ceiling track lifts – some issues are being worked out with the installer for the current lifts in place.

Please describe how this 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:

- All opportunities will be put in an action plan. Also take time to celebrate.

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Facility Name and Number: Melville St. Paul Lutheran Home
73780

Date of visit (DD/MM/YYYY): 28/04/2016

Please list those from the RHA that attended:

Suann Laurent, President and CEO

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

- Residents state they are well looked after, food is good; facility is clean and no foul odors. Friendly staff – Eden approach works well.
- Lots of recreational opportunities that the residents enjoy.
- Residents enjoy the chapel services.
- Residents participate in acute resident council – residents stated they feel there is action from the meetings TLR assessments visible in resident's room.
- They like that they can have fridges to be able to have a drink when someone comes over.
- Hand Hygiene stations in place.
- Staff are caring and show concern for residents.
- Yearly review of care plans are good, would like them more.
- They like that mental health services visit LTC from the region.
- Staff are great according to the families.

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

- Resident stated they would like staff to come around more often especially when needing assistance.
- Need the new call system installed.
- Would like to be able to bath on their day at the time they would like.
- Care plans need to be developed with the families.
- Residents would like more choices at meal time.
- Would like more customized physio/exercising program.
- Families would like to see residents go back to their rooms after meals when they would like to and schedule staggered lunches to help the residents more.

Please describe how this 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:

Opportunities identified in area #2 will be rolled into action plan locally and regionally. Plan to roll out Purposeful Interaction has been scheduled for September 2016.

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Facility Name and Number: Norquay Health Centre
73771

Date of visit (DD/MM/YYYY): 13/04/2016

Please list those from the RHA that attended: Roberta Wiwcharuk, Vice President of Integrated Health Services

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

I attended the Resident/Family Council Meeting with 16 residents, 5 family members, the Heath Services Manager and two Dietary staff members in attendance. The meeting was chaired by the Recreation Coordinator. They were planning a Crib Tournament, a Clothing Sale was scheduled for April 26, 2016 and some new puppies are going to be brought in tomorrow for all the residents to see. The residents and staff are fund raising for a new secure outdoor patio. The CIBC attended the Resident/Family Council Meeting and presented a cheque for \$5000.00. They are planning to have a fish pond, planters, Wheelchair swing and a therapeutic garden in the outdoor patio. Some of the Residents would like to watch Sports, so they requested the Sports Channel be added to their subscription. The Recreation Coordinator and Manager will follow-up. The menu/food was discussed. The residents stated their likes and dislikes are accommodated. They do enjoy BBQ hamburgers and hot dogs. One resident stated "I like just about everything" another stated "the cooks are great", "good food, good service". One family who was unable to attend the Resident/Family Council Meeting sent in some written comments/feedback: "I would like to start with the considerations and kindness we as a family receive from the Norquay Health Center – offer of coffee and treats when we visit at coffee time, being acknowledged when we visit, being accommodated when we order a meal in order to share an evening with our family member, the incredible cleanliness of the facility, the respect we see in interactions, the ability to take part in conferences, the compassion, thoughtfulness and genuine grief that staff displayed when our family member was at the end of life and the care and tenderness shown to his spouse, the phone calls from Activity to inform us of all the activities and all of the effort put into activities. The Activity Department is so very important! Norquay feels like home. All of the extras that staff has done and do to make this a home for everyone is more than noteworthy. All is appreciated. And there is laughter too, which is so important"

The facility had a very warm and welcoming feel. There was Welcome Signage at the entrance, a calendar of events was posted, photos of all of the residents is posted on one wall, a puzzle was being worked on, all the resident rooms were personalized, the dining/common area had birds in a bird cage and a lovely fireplace.

Family stated staff are "very good workers", "it feels good here" and "everything is fabulous".

I attended a Wall Walk where the new Strategy for 2016/17 was posted, Hand Hygiene Rates were discussed and areas for improvement identified, resident/staff incidents reviewed, "Stop the Line Policy" was posted, the Manager asked for feedback on whether or not they should replace one of the tubs that was out of service or if they could manager with one tub in the facility and I discussed the Restraint use in the region and also mentioned the Provincial Target for all LTC Staff to view the educational DVDs on the Program Guidelines for Special-care Homes.

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

In regards to the menu/food, some of the residents indicated the lettuce salad is hard to chew and suggested macaroni or potato salad as an alternative. Some of the residents stated they liked the pizza, while others would prefer soup and sandwich. They suggested the Kitchenette could be brightened up with a coat of paint, as it looked rather dreary. One family expressed their concern with the LTC Admission/Placement Process. Their family member was in Respite in Norquay, then transferred to a LTC bed in another facility and then back to a permanent bed in Norquay in a just a few

days. While appreciative of the care in both facilities and now very happy their family member is in their preferred location, the process was stressful and difficult for the family and resident.

Please describe how this 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:

Dietary Focus Groups for the Residents/Families will continue in 2016/17. The Sports Channel will be added to the TV subscription package. There will be a regional focus on reducing restraint use in all LTC facilities. All staff will view the Educational DVDs for the Program Guidelines for Special-care Homes by March 31, 2017.

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Facility Name and Number: Preeceville and District Health Centre
73774

Date of visit (DD/MM/YYYY): 29/04/2016

Please list those from the RHA that attended: Roberta Wiwcharuk, Vice President of Integrated Health Services

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

I met with a group of residents to ask for feedback. One of the residents stated she "enjoys it immensely here" another stated "it is nice to be close to family" and another stated he "can see deer from his room". The residents were involved in the implementation of Purposeful Interaction on April 26 – 28, 2016. They stated they will appreciate the staff talking to them more and involving them more in their care. They stated for the most part the staff are very good, but sometimes they could be more pleasant and kind. They get fresh fruit, which is appreciated. Some said the coffee/tea is cold, while others said it was too hot; one of the residents responded by saying "you can't please everyone". On the outside of every resident's room is a Shadow Box that has personal pictures, nick/nacks that are special to each resident. The resident rooms are very big, with large windows and beautiful views of the outside. Entertainment and Activities are available if the residents want to participate. There is a lovely resident/family room available, fish tank and birds, Daily Recreation Calendar and plants throughout the facility. One of the residents stated "the staff are all good to me" and has "no complaints".

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

Some of the residents felt there were too many sweets and would like more soup. One resident requested cottage cheese for supper a couple of times a week. Roberta informed the manager of this request. One family member requested a peddle bike that can be used by residents in a wheelchair. His family member used this in another facility and feels it is very beneficial. A regular walking program was also suggested for the residents.

Please describe how this 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 residents will continue attending the biannual Dietary Focus Groups, so they can bring their concerns and requests forward.

Purposeful Interaction Audits will be conducted at 30, 60, 90 and 180 days.

The Health Services Manager will look into borrowing/purchasing a bike.

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Facility Name and Number: Saltcoats Lakeside Manor Care Home
73777

Date of visit (DD/MM/YYYY): 11/05/2016

Please list those from the RHA that attended: Sharon Clark, Director of Health Services South

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

During this site visit I interviewed 3 residents (one who is the Resident Council Chair, and the other two are resident council members), also interviewed was a family member of a resident with dementia. This facility presents a very homelike environment with a total of 30 beds – all those interviewed stated that on the whole staff are very receptive to meeting resident's needs in all program areas (i.e. dietary, cleaning, nursing, pharmacy, physician access).

The following Improvements have been completed:

- Ceiling track lifts in specific rooms has enhanced ability to safely transfer/mobilize residents
- Resident Care Conferences allows resident/family to be involved.
- Family physicians visit onsite regularly and/or as needed.
- The ability and choice to have a phone/TV/computer in their individual rooms
- Facility manager is very receptive to feedback from residents and deals with issues/concerns in a timely manner. All of the residents/family members interviewed during this site visit indicated that they were very pleased with current manager.
- Staff in general are washing their hands upon entry and exit to a residents room

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

- Resident's with very limited mobility indicated that there is only one full sling in the facility (which is often required by more than one resident at the same time for toileting).
- Wandering dementia residents can be very upsetting for cognitive/other residents
- Occupational Therapy access for assessment/review of equipment needs as they change can take a long time.
- During AM and PM care staff seem to be rushing and some staff could be more patient and caring when attending to care/mobilization needs.
- Bathing once a week is good but residents would like to maybe have access to bathing twice a week if possible.

Please describe how this 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:

- Continue to replace and order more slings as needed.
- Install ceiling track lifts as budget allows with an end goal to have ceiling track lifts in all resident rooms.
- Review staffing levels for both AM and PM care to see if re-alignment / increasing staff levels would be possible.

Long-Term Care Quality Assessment - 2016

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

Facility Name and Number: Theodore Health Centre
73152

Date of visit (DD/MM/YYYY): 04/05/2016

Please list those from the RHA that attended: Roberta Wiwcharuk, Vice President of Integrated Health Services

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

I attended the Resident/Family Council Meeting, with 8 residents in attendance and the meeting was chaired by the Recreation Coordinator. They recently purchased 2 Budgee Birds and are enjoying their singing and company. They appreciate the two outdoor patios they have and they do plant a garden. There is a bright and cozy resident/family sitting room available. The tub room now has a towel warmer, which is a great addition for the residents. They have individual birthday parties for all of the residents, which is appreciated by all. They have regular visits from pets, which is enjoyed by all the residents. They enjoy the traditional food that is served and we get "treats from the cooks". One of the residents stated "we truly have beautiful staff", another stated "I recommend Theodore to my friends" and "I never get lonely or bored". The Recreation Coordinator stated "the residents are like our extended family". I attended the Theodore Health Centre Employee Recognition Event where employees were recognized for their years of service and those who have retired. A lovely cold plate lunch was served and everyone present enjoyed each other's company. I also attended the Wall Walk and congratulated the staff on 100% Hand Hygiene compliance.

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

The residents expressed the desire to have fresh vegetables, such as, carrot sticks, celery, cucumbers, etc. They have nothing to chop or peel for activities unless they grow these items in their garden. They would like more exercises. The residents talked about the need for a new handi-bus. They have been without a bus for a year and they really miss the outings they used to go on. The residents, staff and community are funding raising for a new bus. They helped make a Raggedy Anne and Andy Dolls, as a fundraiser prize, and will soon be selling tickets on them

Please describe how this 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 Recreation Coordinator and Health Services Manager were made aware of the residents request for more fresh vegetables. They will certainly try to accommodate this request. Fundraising will continue in order to purchase a new Handi-bus.

Long-Term Care Quality Assessment – 2016

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

Facility Name and Number: Yorkton and District Nursing Home
73776

Date of visit (DD/MM/YYYY): 14/04/2016

Please list those from the RHA that attended: Suann Laurent, President and CEO

Joanne Bodnar, Director of Health Services North

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

- Name tag audits being done.
- Great use of wall walks – great communication. Using Lean in LTC – RPIW's, and 5'sing. At walls they are deploying strategy to point of care in all departments – great leadership. Tracking percentage of Kaizen trained staff. Resident/family Council involved in RPIW work - they are happy with the changes.
- Restraint use is going down – good job. Hand washing rates are going up.
- Using and educating Safety Stop the Line – SAFER acronym on daily visual management.
- Table Cloth Tuesday gives the residents a fine dining experience. Working and delivering a home like experience. Recreation Therapies focus on the residents in laudable. Resident's Palliative rooms are beautiful.

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

- Canteen developed for items for people to buy. This idea came from resident/family council. The canteen was made out of an old med cart – developed punch card for payments.
- Yorkton District Nursing Home (YDNH) Purposeful Interaction – starting at this site in May 2016.
- Everyone needs to wear name tags!
- Need more ceiling lifts in YDNH, including funding to be able to do this. Staff would like scales on lifts – manager is looking at purchasing this. Only 62 ceiling lifts out of a total of 228 beds.
- Lighting on country meadow common area needs to be addressed – a requisition has been put in. Some yellow lights/some white – they are looking into this.
- Staff need to close the door to the residents room when providing care as noted by some of the residents.
- Residents/families love the LPN students that come.
- Resident and Families reviewed Resident and Family satisfaction survey results. Residents would like to see smaller portions and would like to see more kinds of soup and different varieties of muffins.

Please describe how this 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:

Opportunities identified in area #2 will be rolled into action plan locally and regionally.