

Long-Term Care Quality Assessment

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 | X 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: Balcarres Integrated Care Centre - LTC 73005

Date of visit (DD/MM/YYYY): 06/05/2015

Please list those from the RHA that attended: Keith Dewar, President & CEO
Karen Earnshaw, Vice President, Integrated Health Services

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

- Mid-sized facility. Large, secure outdoor space and single rooms with bathrooms
- Bright spacious dining room - have advanced to supporting 'relaxed' breakfast
- Good quality food, residents very complimentary about taste and variety
- Advanced recreational program evidenced by calendar of events every day of the month. Family's made aware and encouraged to participate
- Positive environment, strong leadership and evidence of continuous improvement
- DVM – track QIs and progress at daily huddles
- Good support for medication reviews, decrease in restraints and falls reduction programs

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

- Roof shingles are failing and should be prioritized for replacement
- Continue to advance meal time choices and use of "Suzie Q cart" to support dining experience" versus "feeding"
- Advancing complexity of care and increased resident needs for support with mobility and behavior management challenge care team's ability to make improvements in QIs
- Physical layout of building is a challenge to resource and monitor residents

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Facility Name and Number: Broadview Centennial Lodge 73543

Date of visit (DD/MM/YYYY): 05/06/2015

Please list those from the RHA that attended: Karen Earnshaw, Vice President, Integrated Health Services
Maggie Petrychyn, Executive Director, Rural PHC Services

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

- Strong activity program, integrated with care team and a good fit with resident needs.
- Use volunteer donations, etc to support programming, also have the opportunity to pull community in.
- Strong "community" approach.
- Quality of food, lots of compliments, lots of pride. Incorporating 'menu' into unique needs of facility. Suzie Q cart didn't fit so improvising to 'offer' choice especially at breakfast. Goal is to eliminate pre-prep.
- Several 'younger' residents and plans to incorporate into care/community is evolving.

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

- Outdoor space is 'fenced' but patio door is old and difficult to open/close so families and residents don't use it.
- Flooring in desperate need of repair. Replaced dining room as one off but other areas must be done.
- Foundation not supportive of using donations for 'maintenance'.

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Facility Name and Number: Cupar Nursing Home 73783

Date of visit (DD/MM/YYYY): 06/05/2015

Please list those from the RHA that attended: Keith Dewar, President & CEO
Karen Earnshaw, Vice President, Integrated Health Services

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

- Integration of PHC services into footprint is well thought out, progressing and designed to have minimal negative impact for residents
- Despite age of building, environment is clean, bright and well maintained
- Strong activity program integrated into daily activities. Residents have access to pets, community and meaningful programs such as gardening and baking
- Fully operationalized 'relaxed breakfast' and 'meal time choice'. It is evident on walking through building that 'residents' are at centre of all activity
- Strong community support and involvement – established resident council meets quarterly
- DVM evident, tracking progress on QIs, hand washing, etc. have significantly reduced the number and severity of outbreaks.

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

- No access to quality, secure outdoor space – have a plan and fundraising initiatives in place
- Continue to focus on medication management and falls reduction

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Facility Name and Number: Echo Lodge, Fort Qu'Appelle 73782

Date of visit (DD/MM/YYYY): 27/04/2015

Please list those from the RHA that attended: Karen Earnshaw, Vice President, Integrated Health Services
Maggie Petrychyn, Executive Director, Rural PHC Services

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

- Old facility but bright and welcoming. Good activity program, resident spaces really nice, secure outdoor space that is accessible. Nice view, raised garden, visually appealing. Needs significant repairs to cement and walking surfaces
- Large dining space, lots of room for residents, families and staff to interact
- Whiteboards in every room, but need more focus on using them to add value
- Integrated activity programming, linked well with Adult Day program
- Residents have choice over menu items and meal time

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

- Building needs some basic repairs, especially to roof, concrete and sidewalks as well as main sewer line all pose significant risk if they fail
- Need to continue to increase number of employees trained in GPA
- Need to roll out purposefully hourly rounding

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Facility Name and Number: Extendicare - Elmview

Date of visit: 25/06/2015

Celebration with Residents and Staff, of over three years of zero injuries

Please list those from the RHA that attended:

Michael Redenbach (Vice President Integrated Health Services); Anne Lindemann (Communications).

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

The event was a celebration of the staff accomplishment of zero injuries. Administrator Dan Shiplack presented four separate plaques of recognition from Extendicare head-office, commending Elmview for zero injuries, and for customer services. Representatives of Extendicare Canada, front-line staff, residents and guests were in attendance.

Elmview has helped keep couples together. Of note, 29(1) and will remain so until a permanent location can be found for them to be kept together.

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

Few areas identified, given the celebratory nature of the day. However, it was noted that Extendicare has a proposal before government for replacement of the three Regina Extendicare facilities, and that a decision is required soon.

One resident noted that she wished staff members would wear more formal uniforms. She spoke fondly of the days when Nuns ran healthcare facilities.

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Facility Name and Number: Extendicare Parkside

Date of visit (DD/MM/YYYY): 05/06/2015

Please list those from the RHA that attended: Michael Redenbach (Vice President Integrated Health Services); Dan Kohl (Executive Director Health Services Organizations)

Note: Numerous facility visits occur throughout the year, incorporating visits/conversations with residents, families and front-line staff.
This visit involved attending a daily huddle of the Parkside leadership team – Administrator, Director of Care (DOC), Assistant DOC, Resident Care Coordinators (RCC), dietary, recreation, housekeeping and laundry.
We also did a gemba walk and toured one of the units.

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

- A brief round-table daily huddle occurs where all team members discuss relevant issues/events/activities for the day, including staff book-offs, staff injuries, overtime, falls, and confidential occurrence reports. Support areas are then excused while the Senior Leadership Team and care team discuss care specific issues.
- Falls Committee meets quarterly (monthly if the facility indicator is greater than the threshold set by the Ministry of Health).
- Each unit has a daily work board managed by the RCC's.
- A few more ceiling track lifts have been installed, improving space requirements versus regular resident lifts.
- Parkside recently received an Extendicare President Safety Award for reduction of lost time claims in 2014.
- Implementing daily care audits (including evenings and nights) to improve care and consistency between units.

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

- TLR audits are necessary due to some staff issues following appropriate protocols.
- Facility infrastructure and functionality remains a huge issue for the Extendicare sites.

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

Facility Name and Number: Extendicare Sunset

Date of visit (DD/MM/YYYY): 07/05/2015

Please list those from the RHA that attended: Michael Redenbach (Vice President Integrated Health Services); Dan Kohl (Executive Director Health Services Organizations)

Note: Numerous facility visits occur throughout the year, incorporating visits/conversations with residents, families and front-line staff.
This visit involved a long-service awards celebration (75 staff and numerous residents attended).

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

- Many positive remarks by the union, Extendicare Regional Director, and others.
- This was a positive fun event, engaging both staff and residents.

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

- Nothing was noted at this time.

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Facility Name and Number: Golden Prairie Home 73549

Date of visit (DD/MM/YYYY): 27/04/2015

Please list those from the RHA that attended: Karen Earnshaw, Vice President, Integrated Health Services
Maggie Petrychyn, Executive Director, Rural PHC Services

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

- Robust activity department, programming integrated with all departments
- Relaxed breakfast choice offered for breakfast and plans in place to expand choice of all meals over next month
- Building well maintained, good access to secured outdoor space, visually appealing and well used
- Resident council meets every other month with more than 50% staff trained in GPA, not yet doing Purposeful Hourly Rounding

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

- Repair sidewalks in front as cement cracked – tripping hazard
- One fire door needs replacement
- Whiteboards not well used – need to improve use as a communication tool with families

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| <input type="checkbox"/> Saskatoon | Grenfell Pioneer Home 73544 | |

Facility Name and Number:

Date of visit (DD/MM/YYYY): 19/06/2015

Please list those from the RHA that attended: Karen Earnshaw, Vice President, Integrated Health Services
Maggie Petrychyn, Executive Director, Rural PHC Services

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

- Despite age and state of disrepair of building, provides a real home-like environment and very welcoming. Residents are the centre of care. Integration between staff and residents observed and positive.
- Activity program is growing but an opportunity exists to develop and offer more 'individualized' programming. No weekend or evening activity programs.
- Calendar of meals and events is visible for residents and families
- Resident Council in place but more input is received from individual family encounters
- Outdoor space is accessible and secure but again, functionality is a challenge due to age and design of building.
- Making real progress on flexible meal time and choice. Currently in Week -1 of RPIW focused on improving dining experience. On visit observed an outdoor BBQ which was well arranged and enjoyed by staff, family and residents.
- Community and volunteers engaged

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

- Old building never designed for LTC. Not functionally supportive of care and in real need of replacement.
- Both functional and safety risks associated with building, i.e. exit doors, unlevel floors, etc.
- Expansion of activity programming on evenings and weekends
- Challenge to recruit qualified staff to all departments

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

Facility Name and Number: Long Lake Valley Integrated Care Centre 73057

Date of visit (DD/MM/YYYY): 21/05/2015

Please list those from the RHA that attended: Keith Dewar, President & CEO
Karen Earnshaw, Vice President, Integrated Health Services

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

- Bright, well maintained facility. Good signage, good use of daily huddles and visibility boards
- Families, residents and staff have clear picture of focus areas and strategic priorities of Region and province
- Detailed focus on QIs and care planning discussed at huddles 7 days/week
- Great food, full integration of flexible meal time and food choice. Very well received by family and residents.
- Falls Prevention Program well established, monitored and communicated
- Integrated site that supports not only LTC, but well established Day Programs, Respite and Palliative Care services
- Resident Council active, good support of families, community and volunteers
- Great accessible outdoor space. Very well managed home with strong evidence of family/resident centred philosophy and approach
- Purposeful hourly interactions embedded

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

- Due to age, building will need attention to roof and exterior of facility soon. There are also challenges with HVAC.
- Would benefit from integrated oversight from activity programming

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Facility Name and Number: Lumsden & District Heritage Home 73560

Date of visit (DD/MM/YYYY): 21/05/2015

Please list those from the RHA that attended:

Keith Dewar, President & CEO
Karen Earnshaw, Vice President, Integrated Health Services
Dick Carter, RHA Board Chair
Dan Kohl, Executive Director, Health Services Organizations

Note: Numerous facility visits occur throughout the year, incorporating visits/ conversations with residents, families and front-line staff. This visit involved a gemba walk through the LTC facility to talk to residents and staff – led by one of the Lumsden Board members and the Resident Care Coordinator (acting Interim Administrator).

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

- Affiliated Facility
- Well maintained, home-like, beautiful and secure outdoor space
- Enhanced dining experience with choice and quality food
- Integrated activities
- Established Resident Council with evidence of interaction between families and facility
- Strong community support, full volunteer support and financial
- Beginning work on Purposeful Hourly Interactions
- Observed quality of interactions with staff and residents
- Many positive comments about the food prepared by "Chef Courtney"
- One resident made a point of interacting with the group and stated "the people here are wonderful; the food is great; the outdoor garden and gazebo area is beautiful".

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

- Could advance flexible breakfast times – opportunities to move from task/routine approach to a more fully developed resident centred approach
- Improvements in use and spread of LEAN tools such as DVM, huddles, 5S and VSM would enhance quality
- Need to address ventilation in boiler room urgently
- Evening and weekend activities are very much needed but challenging to resource.
- Physician services in the Lumsden area are challenging – there is only one physician in town. Services are provided to Lumsden Heritage Home weekly.
- Access to Home Care therapies in rural is an issue – wait time for service is significant, no access to cheap transportation (service comes from Regina and is expensive due to the distance) even for in-town services.

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Facility Name and Number: Montmartre Health Center

Date of visit (DD/MM/YYYY): 06/07/2015

Please list those from the RHA that attended: Maggie Petrychyn, Executive Director, Rural PHC Services
Lisa Tarr, Manager, Montmartre Health Center

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

- Bright, clean and welcoming facility
- Home like feeling on arrival
- Residents are generally happy with the meals.
- Lots of community support and involvement in resident activities
- Daily Visual Management – working towards huddles 7 days per week. Staff engaged in discussions. Visibility wall being revised.
- Increased PHC Services for the community - Physician/ NP services 3 days per week.

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

- Outdoor space – nice space at the front of the building but is not secured or easily accessible by residents. Leadership continues to work with RQHR Facilities Management on options.
- Enhanced Dining - Suzie Q cart recently received. Working with Regional NFS and facility staff to implement cart, offer choices, etc.

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Facility Name and Number: Regina Pioneer Village

Date of visit: 09/06/2015

Resident/Family Council general meeting. 24 residents and family members in attendance.

Please list those from the RHA that attended:

Michael Redenbach (Vice President Integrated Health Services); variety of front-line managers from Regina Pioneer Village

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

Multi-disciplinary medication review has been going well; Purposeful Hourly Interactions rolling out on all units – has been very well-received where it has already been implemented; Nurse Practitioner has started – great interest in her role/responsibilities; 'big bouquet' to the volunteers who prepare the outdoor flowers/garden; 'very happy' with Recreation said one resident.

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

Several food-related concerns brought up – desire for more fresh salads and vegetables; less dressing on the salads; hot meals need to be hotter; desire for more variety. (It was noted that RPV is currently conducting a menu review which will address some of these concerns. Also noted that new carts have been purchased and are going into action on Monday, which will address meal temperature.)

Congestion noted around the nurses desk on some units. Trash cans outside the building need to be emptied more frequently. Residents smoking in non-smoking areas of the courtyard.

Desire for more frequent baths.

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Facility Name and Number: Qu'Appelle House

Date of visit (DD/MM/YYYY): 04/06/2015

Please list those from the RHA that attended: Michael Redenbach (Vice President Integrated Health Services); Dan Kohl (Executive Director Health Services Organizations)

Note: Numerous facility visits occur throughout the year, incorporating visits/conversations with residents, families and front-line staff.
This visit involved a meeting with the Qu'Appelle House Board Chairperson and the Administrator along with a facility tour.

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

- The Administrator has created a visibility board that is viewed regularly by staff (located in the administration office).
- 84% compliance on the latest hand hygiene audit. Regular safety talks and TLR audits with staff where they sign off on compliance.
- Tracking inter-disciplinary care conferences to ensure they occur regularly.
- A Resident Experience Survey is forwarded for families to complete (very good response to surveys and high scores).

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

- Even though they have a visibility wall they do not have wall walks at this time and no public place to display the current wall.
- Limited out-of-scope staffing is a challenge to address all the expectations and accountabilities, including accreditation.
- Existing fire doors are in need of replacement.

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Facility Name and Number: Regina Lutheran Home

Date of visit (DD/MM/YYYY): 14/05/2015

Please list those from the RHA that attended: Keith Dewar (CEO Regina Qu'Appelle Health Region); Michael Redenbach (Vice President Integrated Health Services); Dan Kohl (Executive Director Health Services Organizations)

Note: Numerous facility visits occur throughout the year, incorporating visits/conversations with residents, families and front-line staff. This visit involved a gemba walk through the LTC houses/neighbourhoods, proposed primary health care space, proposed community day program space, and attendance at their "Town Hall" meeting (60 people attended including residents, families, and staff).

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

- All in attendance only had good things to say about Regina Lutheran Home. One family member said "your staff do an incredible job and deserve a big pat on the back!"
- The CEO of Eden Care Communities briefly described their planning model for facility renewal and answered questions from staff and families.

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

- Nothing was noted at this time.

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Facility Name and Number: Santa Maria Senior Citizens Home

Date of visit (DD/MM/YYYY): 01/06/2015

Please list those from the RHA that attended: Michael Redenbach (Vice President Integrated Health Services); Dan Kohl (Executive Director Health Services Organizations)

Note: Numerous facility visits occur throughout the year, incorporating visits/conversations with residents, families and front-line staff. This visit involved attending one of the weekly huddles of the Antipsychotic Improvement Project (AIP), a national health care improvement project funded by CIHR. The AIP project is being introduced on a secure dementia floor. We also met with the Executive Director of Santa Maria and he led us through a wall walk of their daily work.

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

- 30 residents that were previously on antipsychotic medications have slowly been taken off such medications without any adverse side effects or behaviours that couldn't be managed in other ways.
- Huddles for the AIP project initially were conducted daily but are now weekly as the initiative becomes embedded in the daily work. They choose a rotation of clients to review each week and call this "Protention Time" (their term for positive attention). 11 staff attended this huddle led by the Resident Care Coordinator and attended by RNs, LPNs, CCAs, and recreation. Monthly graphs are posted and reviewed.
- Families are very happy with the progress of their loved ones in the AIP project, as evidenced by the many positive comments on a "comment board" in place for resident/family communication.
- Santa Maria has created an impressive Daily Work Indicator board that tracks resident pain, restraint usage, wounds, antipsychotic use, falls, staff injury, sick time, and overtime. Monthly/quarterly graphs are prepared for trending analysis.

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

- As a result of the significant positive outcomes with reduced/eliminated antipsychotic use, "these residents are now alive, not as sleepy, and experience boredom and there is a need for more recreation" programming and staffing.
- Some physicians are resistant to change. Some residents have gone to hospital for acute care needs and have returned to Santa Maria on some of the same medications that the staff worked hard to get them off of.

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 type="checkbox"/> Mamawetan Churchill River |
| <input type="checkbox"/> Keewatin Yatthe | <input type="checkbox"/> Prince Albert Parkland | X 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: Silver Heights Special Care Home

Date of visit (DD/MM/YYYY): 21/05/2015

Please list those from the RHA that attended: Keith Dewar, President & CEO
Karen Earnshaw, Vice President, Integrated Health Services

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

- Bright, well maintained facility
- Welcoming, home like environment
- Strong support from community – fundraising, donations and volunteers to support programming
- Integrated activities
- Positive interactions between residents and all departments – truly a home environment
- Daily huddles, link MDS, QIs and Metrics with daily work, shift by shift
- 5S and other LEAN projects led by front line staff, strong focus on improvement
- Flexible meal plan, integration of “choice” at meal times and menu planning all started, progressing and well received
- Secure and well planned outdoor space, recently upgraded via donations and plans to enhance further led by community
- Purposeful hourly interactions embedded

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

- Building will need attention to roof and exterior simply due to age
- Would benefit from support of centralized planning/oversight for recreation/activity programming

Long Term Care Quality Assessment

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 | X <input checked="" 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: Southeast Integrated Care Centre – LTC 73542

Date of visit (DD/MM/YYYY): 05/06/2015

Please list those from the RHA that attended: Karen Earnshaw, Vice President, Integrated Health Services
Maggie Petrychyn, Executive Director, Rural PHC Services

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

- Enhanced dining experience is phenomenal, great food and choices. All departments cooperate to improve resident's experience, promotes more of a 'home' experience, choices offered for breakfast especially
- New, bright, purpose built to support program
- Progress of activities well integrated and designed around family/resident
- Resident council well established with minutes circulated and audited by manager
- Volunteer programs active, engaged in fundraising, etc.
- Some weekend activities, mostly by volunteers but moving toward 7 days/week through staff redeployment
- Well established PM program including lifts and slings
- Tub temperature logs

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

- Recreation is 'separate' and set apart due to physical layout that centralized the area
- Behaviour Management resources are limited
- Will need to plan for younger population that is moving into LTC due to ABI/CDM, etc.

Long-Term Care Quality Assessment

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 | X 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: St. Joseph's Integrated Care Centre, Lestock 73079

Date of visit (DD/MM/YYYY): 27/04/2015

Please list those from the RHA that attended: Karen Earnshaw, Vice President, Integrated Health Services
Maggie Petrychyn, Executive Director, Rural PHC Services

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

- Small facility, families and residents well known to staff and involved in all areas of decision making and planning
- Meal times flexible, opportunity for residents and families to have choice and input into meal times
- All staff trained in GPA – good buy-in for Purposeful hourly interaction. Struggling on audits and metrics
- Older building but well maintained: LTC & PHC services co-located
- Activity program involves all staff
- Limited number of volunteers, somewhat difficult to have 'good variety' of activities due to small numbers
- Resident council meets regularly and families have input into agenda and discussion items

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

- While there is access to outdoor space, the space is not inviting and could use planters, patio furniture, etc
- Use of white boards as a communication tool for families need to be improved on

Long-Term Care Quality Assessment

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 |
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| <input type="checkbox"/> Prairie North | <input type="checkbox"/> Sun Country | <input type="checkbox"/> Sunrise |
| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Wascana Rehabilitation Centre

Date of visit: 29/05/2015

Note: Numerous other visits occur throughout the year, incorporating visits/conversations with residents, families and front-line staff. The date of this visit – May 29, 2015 – involved a meeting with front-line managers.

Please list those from the RHA that attended:

Michael Redenbach (Vice President Integrated Health Services); Lisa Chamberlin (Director of Care, WRC), five Unit Managers – Shauna Leonard, Elaine Whitford-Mantyka, Carla Wekerle, Shelley Serle, Kat Moyer

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

Always able to hire trained Continuing Care Aides; good attention being paid to sick time and overtime utilization (reviewed daily); achieved good Accreditation rating; flexible and creative in making arrangements for specific bed needs of residents; large number and variety of improvement efforts under-way, including replication of previous improvements (eg. Falls reduction), mistake-proofing projects, 'Stop-the-line' pilot project; preventative maintenance pilot project; RPIW on Unit 2-6 (re: shift hand-over)

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

Beds are available but not always for the specific needs of in-coming residents – often result in having to move other residents to make accommodations; financial management continues to be an area of focus and concern.

Long-Term Care Quality Assessment

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| <input type="checkbox"/> Athabasca | <input type="checkbox"/> Five Hills | <input type="checkbox"/> Heartland |
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| <input type="checkbox"/> Prairie North | <input type="checkbox"/> Sun Country | <input type="checkbox"/> Sunrise |
| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Whitewood Community Health Centre 73547

Date of visit (DD/MM/YYYY): 05/06/2015

Please list those from the RHA that attended: Karen Earnshaw, Vice President, Integrated Health Services
Maggie Petrychyn, Executive Director, Rural PHC Services

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

- Bright, welcoming home-like environment
- Active community with good volunteer base, involved in programming as well as fundraising
- Relaxed 'timing of breakfast' but very early in progress of 'choice' at mealtime
- Use daily visual management and tracking QIs but just getting started in incorporating reporting and CAPS into daily huddles
- Really nice, safe and easy accessible outdoor space
- Activity Program is integrated into everyday experience. SCAs support activities on evening and weekends
- Have a resident council but not really supported by families. Families use activities as opportunities to become involved – have choices and support programming

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

- Opportunity for QIs to lead/direct care
- Dining area is outdated, could benefit from 'freshening' up to further move toward enhanced dining experience
- Boiler repairs are required to be able to install recently purchased hot water heaters

Long-Term Care Quality Assessment

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 | X <input checked="" 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: William Booth Special Care Home

Date of visit: 24/06/2015

Summer Family BBQ, and meeting with Community Council

Please list those from the RHA that attended:

Michael Redenbach (Vice President Integrated Health Services);

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

The event attended was a summer family barbecue. Similar events are held several times per year. It was an excellent occasion, with great attendance by many families and friends of the residents. A festive atmosphere with great food.

William Booth has excellent recreational programs for residents, including activities every day and evening.

Their outdoor garden is beautiful and well cared for – supported by volunteers, with capital funding support from many community partners and businesses. Residents are able to tend to their own flower gardens.

Food at William Booth is a priority, and is very good.

William Booth, as part of the Salvation Army, has it's own reporting structure. However, they have established a local advisory Community Council, whose members represent a variety of backgrounds and experiences, including family members of former residents.

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

Few areas identified. While staffing is generally felt to be reasonable, there are significant pressures on staff during specific times of day, such as during the morning routine. Also identified that availability of an OT/PT assistant would be helpful.

Long-Term Care Quality Assessment

Please Select Your Health Region:

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| <input type="checkbox"/> Athabasca | <input type="checkbox"/> Five Hills | <input type="checkbox"/> Heartland |
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| <input type="checkbox"/> Prairie North | <input type="checkbox"/> Sun Country | <input type="checkbox"/> Sunrise |
| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Wolseley Memorial Integrated Care Centre

Date of visit (DD/MM/YYYY): 27/05/2015

Please list those from the RHA that attended: Karen Earnshaw, Vice President, Integrated Health Services
Maggie Petrychyn, Executive Director, Rural PHC Services

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

- Large facility, open, single rooms, lots of storage
- Bright common areas to support integrated activity programming, but still promote interaction between residents, staff and families
- Large accessible outdoor space, but should consider alarming all doors that exit building to support safety
- Integrated facility that enhances access to reliable PHC services supported by RN (NP)
- Building is in good repair but décor and 'extras' are beginning to show age. Will need attention, regular painting, etc in very near future
- Good support of family and volunteers. Resident Council in place, but sometimes a challenge as many residents are not from Wolseley so family is not close by
- Very early in use of LEAN tools and improvement work. Manager has introduced DVM as a key starting point

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

- Progress in enhanced dining, especially related to flexibility and choice for residents
- Focus on QI improvements and embed in care planning
- Add "wanderguard" function to all external exits