

Long-Term Care Quality Assessment - 2017

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

Facility Name BATTLEFORD DISTRICT CARE CENTRE
and Number:

Date of visit (DD/MM/YYYY): 16/02/17 20/04/17

Please list those from the RHA that attended: Board Member Wayne Hoffman, Board Chair Bonnie O'Grady, Gloria King, Vice President, Integrated Health Services.

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

- Resident Council is well attended. Residents and family members easily voice suggestions and concerns.
- One of the Residents is President of the Council. Microphones are used so that all Residents can hear.
- Resident Council: Residents feel empowered to acquire resources that enhance quality through the Shoppers Drug Mart funding. They have purchased an ice machine most recently.
- Resident Council: Residents were pleased to see results of a letter written to the Town Office regarding the poor condition of the road leading to the facility. Efforts by the Town of Battleford & Central Services resulted in both the facility hill road and the town road being paved. This makes travel on the bus & ambulance much less bumpy and painful for residents.
- First Nations Liaison Program –provides cultural programming specific to First Nation's residents.
- Expanded music-based programming through the purchase of digital pianos that are dedicated to a specific unit.
- Facility Manager, Assistant Facility Manager, Department Heads of Support Services, Nursing Unit Coordinators, as well as Regional Social Worker and Regional Meaningful Life Specialist are available at Resident Council to answer questions in real time. This is a very effective process.
- The rapport among Residents and Staff is apparent at Resident Council. The Facility Manager is responsive to the Residents and promotes a respectful environment at all times. e.g. Residents were planning for a repeat sock hop in the auditorium. They were delighted to be dancing with the Facility Manager and teasing her about her sore hips the following day.
- Staffing was increased on one heavier care unit due to the advocacy of the families.

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

- Desire to improve facility to become more homelike. Dementia Unit selected for a pilot project with Recreation and Nurse in Charge to explore possible strategies/actions to improve the environment. .
- Discussion is ongoing on how to recruit members for an Auxiliary. Members have retired due to age.
- The lack of air conditioning in most areas of the facility makes it extremely uncomfortable for Residents when the temperature is around 30 degrees. The facility can be cold in the winter as well. Central Services has been out to do an assessment.

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:

- Information will be incorporated into ongoing planning for the facility. Specific needs are requested through the Capital Program.
- The Facility Manager seriously considers and develops plans from the needs that are expressed by the Residents and members of the care team.
- Sharing of ideas from one facility to another for improvements benefits all Residents.
- Provides direction/plan for quality improvement. Resident Councils will also be used to promote Safety and Prevention of Falls.

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Facility Name and Number: Cut Knife Health Complex – Cut Knife 73586

Date of visit (DD/MM/YYYY): July 11, 2017

Please list those from the RHA that attended:
Regional Board members; Meaningful Life Consultant; Recreation Worker; Facility Manager;

Date of visit (DD/MM/YYYY): **May 9, 2017**
Director Rural Facilities; Regional Board Members; Meaningful Life Consultant; Recreation Worker.

Date of Visit (DD/MM/YYYY): **March 14, 2017** – Meeting cancelled, unable to make quorum.

January 10, 2017 – Maintenance Manager, Regional Board Members, Recreation Worker, Meaningful Life Consultant.

November 8, 2016
Recreation Worker, Meaningful Life Consultant, VP Operations/Finance, Board Members

September 13, 2016
Facility Manager, Recreation Coordinator, Meaningful Life Consultant, Maintenance Manager, Board Members

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

Residents have enjoyed having our Summer Student this year; residents enjoyed several special events: Rider's Day, summer picnics and BBQ's; Christmas party and monthly theme celebrations (St. Patrick's Day).

Residents really enjoy food based programs such as the Breakfast Club, fresh bread baking.

Quality Survey: Residents reported the facility pets are enjoyed. (birds and cat); and 100% surveyed agreed overall this is a good place to live. (12 out of 12 residents surveyed).

Dietary: Residents have reported they see improvement with the variety of foods offered. Paging residents giving them a 10 minute warning to come to the dining room has eliminated excessive waiting in the dining room. The full time and part time cook positions have been filled which enhances smoother operations in dietary.

Building: Roof repairs completed in the kitchen. Broken asphalt at the front door, wheelchair ramp and front parking lot has been repaired; the east entrance to the front of the building has been filled in with dirt by the town. The wheelchair ramp has been repaired to decrease the slope; the generator has been repaired. In August 2017 the wheel chair accessible door opener was installed.

The full time Facility Manager commenced her position June 12, 2017.

Equipment: New equipment purchased by the Community trust fund included 3 blood pressure machines, air mattresses, new headboards to accommodate the new air mattresses, 3 air nebulizers and transfer belts. The new tub chair, funded by the Foundation, was delivered in August, which enhances the bathing experience for both residents and staff.

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

Dining room with arm rests had been requested; however it has been identified that the resident population has changed and there are adequate chairs available for those who need them. The quote provided by Schaan Healthcare products is excessive and will be discussed at next Resident Council meeting.

Wing 100 needs an exterior key pad to allow entry from the courtyard should the exterior door close on anyone outside. This is currently under investigation by Facility Manager to have completed.

Residents would like to see the building have WiFi installed.

Exploring ways to increase First Nations programming.

New blinds in the dining room has been requested by residents/staff.

Please describe how 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 new Bar-B-Q enabled the residents to enjoy outing the entire spring and summer months.

The Dietary Supervisor has worked with new staff orientation; menu planning to appease residents with specific requests and has added more variety in desserts.

The front door wheelchair ramp is safer for the w/c bound residents to safely use; the east entrance is a smoother surface to drive in to the parking lot. The wheel chair accessible door button makes the front more accessible for residents and family to enter/leave the facility.

The new tub chair promotes personal care for all residents.

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Facility Name and Number: Lady Minto Health Care Center, Edam - 73033

Date of visit (DD/MM/YYYY): November 9, 2016
Please list those from the RHA that attended:
Director Rural Facilities
Meaningful Life Specialist
Manager Environmental Services
2 Board members

February 22, 2017
Temporary Facility Manager
Manager Dietary Services

May 10, 2017
Meaningful Life Specialist
Manager Environmental Services
Facility Manager

August 9, 2017
Meaningful Life Specialist
Manager Environmental Services
Temporary Facility Manager
Board Chairperson

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

- Residents and families appreciate the staff and summer student.
- Residents and families voice dietary changes/selections which Dietary make changes in the menu.
- Residents enjoy home grown local produce prepared by Activities.
- Residents enjoy the comfort of fireplace added to the dining room and tablet they purchased.
- Residents enjoy the flooring that was changed from carpet to linoleum in the recreation room.

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

- Residents and families continue to voice concern regarding wandering residents coming into their rooms.
- Residents voiced concern over walking path and emergency exits are not smooth surfaces.
- Residents and families would like Wi-Fi available.
- Residents voiced concern shirt savers from KBro linen, as they are hard to position properly

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:

- Resident and Family Council meetings continue to have good representation.
- Capital Items have been identified and are prioritized for purchase (Wi-Fi; more secure wanderguard doors).
- SCH guidelines DVD training completed by staff

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Facility Name and Number: **L. Gervais Memorial Health Centre, Goodsoil - 45**

Date of visit (DD/MM/YYYY):

Dates of Residents family council meetings over the last year are:
Sept.12/16, Nov. 14/16, Jan. 9/17, and Apr.10/17, July 10, 2017-
Kelly Lyon, Facility Manager

Please list those from the RHA that attended:

Neal Sylvestre, Director Rural Health Facilities – Sept./16, Nov./16, July/17
Kelly Lyon, Facility Manager – Sept/16, Nov./16, Jan./17, Apr./17, July/17
Karen Kindrachuk, Meaningful Life Specialist – Sept/16, Nov./16, Apr./17, July, /17
Chelsea Hofer, Rec Worker – Sept./16, Nov./16, Jan./17, July/17
Tracy Sherwood, Rec Worker – Apr./17

PNRHA BOARD MEMBER - Jane Pike - Sept./16, Nov./16, Apr./17, July/17
SLT MEMBER – Derek Miller, VP Finance & Operations – Nov./16
- **Vikki Smart**, VP Primary Health Services – Nov./16

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

- Installed light on back patio so residents can go out after supper if they wish.
 - Wooden planters purchased from resident family council are enjoyed by residents
 - Weekly bar-b-qs during Summer enjoyed by residents.
 - More fruits and vegetables served
 - Raffle baskets during Christmas worked well - \$627.00 raised
 - Community Bar-B-Qs done at local Credit Union – help raise money and is great community involvement.
 - Utilize the local Lion's Club Handi-van – regular outings enjoyed over the Summer including purchasing flowers and ice-cream.
 - Programming promoted community involvement: intergenerational visits by school groups, community music groups, spiritual support from local churches
 - Residents and families are pleased with care and cleanliness of facility.
-

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

- Heating and cooling in building – long standing issue with heating and cooling in building. The building has had new computer system installed and ventilation system replaced. Improving but still some rooms are hotter/colder than others.
- Security system – education needed for staff regarding alarm system
- Manager to make self-more visible with residents and introduce self to families as per Family survey response.

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:

- We have purchased some individual room heaters and fans and have had to utilize these when necessary.
- Discuss at huddles that this is resident's home and they need to be warm. Ensure building is warm.
- Memos and work standards done regarding alarm system– discussed at huddles.
- Manager visiting floor weekly as per Family survey response.

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Facility Name and Number: Jubilee Home #25119

Date of visit (DD/MM/YYYY): June 9/16-Facility Manger, Board Chair Bonnie O'Grady and Board Member Anil Sharma, Meaningful Life Consultant, Food services Supervisor, Recreation. Dec. 1/16- Facility manager, Director of Care, Bonnie O'Grady, HSKG and Laundry Manager, Food Services Supervisor, Rec Sept 8/16- Facility Manger, Bonnie O'Grady and Anil Sharma, Meaningful Life Consultant, Food Services Sup, Rec Mar 9/17- Facility Manager, Bonnie O'Grady, Recreation

Please list those from the RHA that attended:

See above

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

- Love the new nurse call system and the new automatic doors at the front entrance!
- Good infection control/hand hygiene as no outbreaks this season.
- Maintenance support and communication has improved
- Purposeful Rounding is now standard work. Implementing the documentation on the supportive care flowsheet
- The addition of TFT and PPT LPN positions had helped with the continuity of care. Families are pleased that the residents receive a monthly treatment by LPN with their bath for proper foot care and overall assessment.
- Increase of the 1600-2100 evening CCA to 2230 has assisted with toileting and more comprehensive HS care.
- VIS Wall and Family Board are side by side and provide good communication and team moments which improve Resident Care.
- Upcoming recreation programs are reviewed at each Resident Council. Families and Residents are asked for feedback and suggestions
- Residents enjoy regular outings and special events throughout the year

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

- Improved attendance and interaction at Resident Council by Residents and Family Members.
- Irregular physician visits remains a concern. Only 50% attendance of physicians at the annual case conference.
- Lack of security at night. Jubilee Home is often mistaken for the hospital and has no video surveillance.
- A new tub was requested to replace the 2004 tub.
- There is a need to designate handi-cap parking in the front parking lot

- Fluctuation of temperatures in the facility often causing discomfort for Residents and staff
- Many safety concerns with high risk smokers wanting to smoke more. The smoke wafts back inside to the dining room. The dining room becomes cold in winter when smokers go out to smoke.
- Food concerns – Residents want more variety. The Resident population is younger with an average age of 75 years.
- Younger Residents are asking for different programming.
- More equipment is needed to help with prevention of falls.

Please describe how 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:

- A minimum level of all types of Falls Prevention Equipment has been provided to each LTC facility.
- A chiller has been approved in the new capital budget. This will help with temperature regulation.
- Residents and family will be canvassed to see what would enhance participation at Resident Council.
- A Work Standard is being created for Resident Assisted Smoking and will be reviewed at the annual case conference.
- Meaningful Life Specialist and the Recreation Team met on August 30, 2017 to begin development of programming for the younger generation of Residents. .
- A new reclining tub was approved in the Capital budget.
- Consulting with physicians to schedule convenient dates for the annual case conference.
- Adjustments/revisions were made in response to requests to have more salad and fruit in the summer.

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

Facility Name and Number: **Loon Lake Health Centre - 81**

Date of visit (DD/MM/YYYY):

Dates of Resident family council meetings over last year are: **Sept. 12, 2016, Nov. 14, 2016, Jan. 9, 2017, April 10, 2017, JULY 10, 2017**, – Kelly Lyon, Facility Manager.

Please list those from the RHA that attended:

Neal Sylvestre, Director Rural Health Facilities - Sept./16, Nov./16, July/17
Kelly Lyon, Facility Manager – Nov./16, Jan./17, Apr. 10/17, July/17
Karen Kindrachuk, Meaningful Life Specialist – Sept./16,, Apr. 10/17, July/17
Joe Grela, Maintenance Manager – Jan./17
Veronica MacInnis, Rec Worker – Sept./16
Terry Loehndorf, Rec. Worker – Nov./16, Apr./17
Deb Wells, COOK – Sept./16, Nov./16

PNRHA BOARD MEMBER - Jane Pike - Sept./16, Nov./16, Apr./17
PNRHA SLT MEMBER – Derek Miller - Sept./16,

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

- Reintroduction to monthly calendar and newsletter
- Residents enjoyed petting zoo and Elvis Impersonator–money came from resident family council - Sept./16
- Rec Worker hours increased from 4 hours X 5 days a week to 6.5 hours X 5 days per week.
- Christmas basket raffle – Nov./16 – Earned \$860.10.
- Residents enjoy the backyard renovations with landscaping that include the newly created paved path so that they can meander around the yard and enjoy the flowers and vegetables. Strawberry plants donated by Rec Worker and baby tomato plants purchased from resident family council funds. – Apr./17
- Programming promoted community involvement: intergenerational visits by school groups, community music groups, spiritual support from local churches
- Weekly Bar-B-Qs enjoyed by residents

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

- Handivan – Loon Lake does not have an easily accessible handivan. It would be nice to have a van that activities could use to take residents in for outings.
- Would like to have a Physiotherapy assistant on a daily basis to assist with mobility. PT/OT only comes twice a month.
- Would like to see more meaningful activities in Recreation. Survey responses suggest recreation could be improved with respect to casual replacement and resident involvement.

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:

- Work with PT to have good written out care-plan with instructions and or pictures so that staff can assist when able as well to have frequent follow up visits with PT.
- Some community members with van have allowed residents/recreation to borrow for some outings.
- A lot of time spent out in backyard during Summer hours to get fresh air and sunshine and enjoy garden. In Fall plan to start daily exercise program.
- Plan to post casual replacement in recreation.

Long-Term Care Quality Assessment - 2016

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

Facility Name Maidstone Health Complex (Pine Island Lodge)
and Number: 25128

Date of visit (DD/MM/YYYY): October 2016, Jan 2017, April 11, 2017, July 2017

Please list those from the RHA that attended:

Bonnie Ogrady – Board Member Jan 2017 July 2017
Gillian Churn – Board Member Jan 2017 April 2017 July 2017
Neal Sylvestre – Director Rural Facilities Oct , 2016 April 2017 July 2017
Laurie Gillespie – Director Maintenance
Karen Kindrachuk – Meaningful Life Specialist Oct, 2016, April 2017
Leonard Wegner - Facility Manager Oct , 2016 Jan 2017 April 2017 July 2017
Tanya Wallace – Food Services Supervisor Jan 2017 April 2017

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

Resident Council

- Resident council is well attended
- Residents enjoy multiple special events throughout the year (eg: resident art show, Elvis Impersonator, musical entertainment from community & surrounding area)
- Residents participate in regular community outings (eg: Lloyd fair, North Battleford Casino, Petting Zoo, parade)
- A wedding of a residents family was live streamed so that it could be watched
- Summer student for summer of 2017
- Purposeful rounding is working well
- Family/resident surveys completed
- Christmas meal enjoyed by all
- Three hour cca has been added to the evening as this was identified as a time when staffing was minimal. Seems to be working well. There are times when extra baths are given or further activities take place
- Residents happy with laundry and housekeeping staff
- Gifts given to residents for Christmas from local coop, radio stations and Union
- Several pieces of equipment purchased thanks to the local funding partners and donations. Smart TV, Blanket warmer, chairs Gazebo, flowers for the petunia tree and patio furniture

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

- Ongoing staff education to improve dementia care programming
- Temperatures in rooms still an issue for some residents – Working with each specific case to monitor and control temperature in rooms. Brining in printout of temps in the building

- Some residents find the presentation and choices of meals not what they like
- Reminded residents and family members of need to label clothes before they are put into service
- Residents were polled and would like a facility dog. Working with local dog rescue society to find an appropriate dog
- During the winter when it freezes and thaws the front entrance is slippery. Working with Maint to find an appropriate solution

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:

- Working with food services to improve presentation of meals. Dark meat has been added to the menu so that there is a choice of white and dark meat
- Rice has been decreased and potatoes added to the menu more
- Residents asked to let facility manager or RN know asap if there are issues with meals so that they can be dealt with in a timely manner.

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Facility Name Northland Pioneer Lodge
and Number:

Date of visit (DD/MM/YYYY): Insert date of Res Council where Jane attended

Please list those from the RHA that attended:

Jane Pike Board member attends Resident council
Monique Pretty- Director of Continuing Care
Shelley Wasyliw- Facility Manager
Gloria King – VP Integrated Health Services – 3 walk-about throughout the year

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

- Residents have weekly access to dietician, occupational therapy and physiotherapy.
- New menu and menu board- residents enjoy knowing the menu for the week
- New Welcome Process received positive feedback. Residents, families and staff are given the opportunity to meet each other for a longer period of time. This decreases the anxiety on move in day.
- It is noteworthy on walk-about that in spite of the very difficult physician environment, Residents and Staff make an effort to keep their spirits up when they interact with each other.
- Purposeful Rounding has enhanced resident care and involvement in social activities. It has decreased falls.
- Pharmacy attends the three month med reviews which enhances safety for Residents.
- Audits eg. Fall prevention, infection Control is beneficial in enhancing resident care
- Safety Alert System "team Moment" encourages staff and residents to look for the root cause in the moment and has decreased repeat incidents
- Good Catch program increases staff awareness of safety and has shown patterns of safety issues. Eg wet floors.
- New pavement around the facility enhances safety for Residents and Family members.
- Kanban of supplies has improved availability for resident care.
- Daily Facility Huddles with all Departments promotes problem solving and enhances teamwork. This is a tremendous benefit to the Residents. Minutes are provided following the huddle so that all staff can be aware.
- Increased recreation staff has allowed for increased opportunities for residents.
- Regional Social worker involvement with all residents as required. This has added support in difficult situations.
- All disciplines contribute to Resident/Family conferences and are available to answer questions.
- Weekly physician visits ensure that Resident needs are met in a timely way.

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

Residents and families are disappointed in the lengthy delay in the construction of the new facility. Some upgrades have been delayed in anticipation of the approval for construction. This has had some impact on Resident and Family hope for their loved ones to enjoy new surroundings in their final years.
Increased cost for repairs and maintenance of building.

Weight limits remain on the south wing of the facility and floors slant in some areas.

Inadequate space for total lifts in resident rooms can create safety issues.

Extension cords are a risk but are necessary to provide safe care. Devices such as oxygen concentrators and air mattresses are safety priorities for Resident Care.

South wing resident rooms do not have emergency back-up power. Staff must run extension cords in order to move the beds up or down. Air mattresses deflate so residents are removed from their beds immediately to prevent pressure ulcers.

Temperature control is difficult to maintain and air circulation can be difficult in some areas.

Residents and families feel there is not enough staff in the mornings and evenings. They have extended wait periods for care during these times.

Concerns about handivan access.

Resident Council attendance and input can improve.

The new LTC Care plan is being trialed. This will enhance personalized and comprehensive care for residents.

Please describe how 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 prioritize building and equipment repairs and complete as required.

Anticipate construction of new facility for the Residents and surrounding areas of Meadow Lake.

Discuss handivan access with the City of Meadow Lake with Senior Leadership present.

Continue to monitor workload for nursing in the mornings and evening and provide extra assistance as needed.

Formulate a plan to increase resident involvement in Resident Council

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Facility Name and Number: River Heights Lodge - 73579

Date of visit (DD/MM/YYYY): 16/02/17 20/04/17

Please list those from the RHA that attended:

September 15, 2016

Regional Board Member

Meaningful Life Specialist (MLS)

October – Facility Outbreak – No Meeting

November 17, 2016

Regional Board Member

Social Work

December – No meeting

January 19, 2017

Regional Board Member

MLS

Social Work

February 16, 2017

VP Integrated Health Services

Regional Board Chairperson

Regional Board Member

Social Work

March 16, 2017

Social Work

April 20, 2017

VP Integrated Health Services

Regional Board Member

MLS

Social Work

May 18, 2017

Regional Board Member

MLS

Social Work

June 15, 2017

Regional Board Member

MLS

Social Work

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

- Resident Council has been thriving. Residents and family members are vocal regarding their suggestions and concerns. A microphone is enjoyed so that each individual speaking can be heard.
- Resident Council - Residents feel empowered to provide required resources for resident focused purchases through the Shoppers Drug Mart funding.
- Resident Council- purchase of clothing labeler has decreased the occurrences of lost resident clothing.
- RHL Bus - promotes regular community involvement.
- Improvements in outdoor spaces providing more areas for residents/families to gather & enjoy (eg: raised garden beds, flower pots, concrete patio, sun shade). Outdoor recreation programs utilize this space as well.
- First Nations Liaison Program – bridges the identified gap by providing cultural programming to our First Nations population.
- RHL Auxiliary continues to support outdoor projects and purchase of comfort items.
- The East Side Nursing Unit 08:00 medication delivery process was examined and revised resulting in enhanced resident safety through the LILT program

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

- Quality of the meal and nourishment snacks. Residents and family bringing concerns forward as needed daily, at annual conference, and annual satisfaction surveys.
- Infrastructure issues continue to be outstanding, i.e. closet doors
- Tub renovation – submitted as Capital request and remains outstanding.
- Ceiling fans in common areas/hallways to improve air quality for 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:

- Involve the quality improvement program to suggest LEAN improvement processes to address concerns.
- Strategic planning sessions focused on LTC.
- Department heads involved in resident council strive to address resident and family concerns for optimal results. At times we are able to review processes with the involvement of families.
- Resident/Family experience surveys were completed and the results have been received. RHL will be meeting with residents, family members, and the interdisciplinary team to develop quality improvement plans.
- The tub room has been approved for renovations this year. This will promote patient and staff safety with the new design.

Long-Term Care Quality Assessment - 2017

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

Facility Name and Number: **ST. WALBURG HEALTH COMPLEX- LAKELAND LODGE- 25137**

Date of visit (DD/MM/YYYY): 5/10/ 2016; 04/01/2017; 05/04/2017; 16/08/2017

Please list those from the RHA that attended:

Vikki Smart VP- 5/10/2016
Neal Sylvestre Rural Director-04/01/2017, 05/04/2017, 16/08/2017
Karen Kindrachuk Meaningful Life Specialist- 05/04/2017, 16/08/2017
Bethany Bloom Facility Manager; 5/10/2017, 04/01/2017, 05/04/2017, 16/08/2017
Carmen Jack Environmental and Dietary Manager; 16/08/2017
John McInnis Dietician; 05/10/2016
Helen Lundquist Board Member; 5/10/2016, 05/04/2017
Bonnie O'Grady Board Member; 16/08/2017

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

Recreation

- Weekend recreation every other wkend. Residents reporting they enjoy the extra activities.
- Residents are asked about their activity preferences at res council meetings, and informed of upcoming special events planned for the month.
- Residents are regularly asked to approve dollars for purchasing equipment suggested by recreation staff to continue to provide variety in programming as well as respond to resident's expressed interests.
- Music entertainment occurs twice monthly as we have two groups who come every month. There are two other groups who come and entertain when they can.
- Mass is held every Friday for Residents to attend and United Church services monthly Sept - June
- Gardening is a regular occurrence for our Residents in the summer months. They grow tomatoes, cucumbers, raspberries and many beautiful flowers.
- Updating décor in Resident living room area
- Hairdresser on site weekly

Resident Satisfaction Surveys

- Experience ratings were high with an average rating of 95.84%
- General satisfaction ratings were 100% when asked if it was a good place to live.
- Overall the Resident satisfaction surveys have been very useful to help direct the care we give.

Family Satisfaction Surveys

- We have a high level of family participation in St. Walburg, as evidenced by our 12 respondents.
- Overall the Family satisfaction surveys have brought to light areas that we can continue to improve upon, which is beneficial for staff development.

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

Recreation

- Local handi-van rates have increased to \$1.00/km. The existing recreation budget restricts our ability to provide community outings anywhere outside of St. Walburg town limits.
- Automatic door opener needed for gated courtyard.
- Residents and Families would like to see increased access to Physio and Occupational Therapy

Resident Satisfaction Surveys

- Communication ratings have highlighted that although Residents feel listened to, they do not always feel informed. Average rating of 82.5%
- Several areas were highlighted in the survey results as opportunities for improvement, including; Resident involvement in care decisions, building temperature and laundry services.
- Food temperatures have been a concern at Resident Family Council meetings.

Family Satisfaction Surveys

- Several areas were highlighted in the survey results as opportunities for improvement, including; experience, communication, care provision, building temperature, laundry services and professionalism.

Please describe how 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:

- Letter sent to town re increase in handi-van rates. Planning fundraising options with Activities department to help offset costs. Discussed with Twin Rivers Health Foundation regarding possible use of donation dollars
- Automatic door opener identified and being discussed with Maintenance Manager. Possibility of moving/utilizing automatic door opener that is not in use from north staff entrance to courtyard door.
- Requests/referrals sent to OT/PT as needed. Recreation staff providing exercise program. Nursing to carry out range of motion exercises and walking program.
- Staff meeting booked for Sept 7, 2017 to review Resident and Family survey results, ie; involvement in care decisions, communication, care provision and professionalism.
- Heating issue was resolved shortly after the survey. Our boiler system was not set properly and needed a few replacement parts.
- Laundry routine has changed and services are improving.
- Purposeful Rounding is in place and a practice we are continually striving to improve upon.
- Survey results to be reviewed at Resident Family Council Oct 4/17
- Dietary/Maintenance looking at upgrading electrical in the kitchen to support steam tables to help ensure warm food temps at all times.
- Generator/power plant upgrades coming approx. Nov 10/17. Currently our back up power does not power the whole building. When upgrades are completed we will have full back up power support.
- Updating décor in Resident living area with new blinds, paint and leather recliners. This change will give the Residents more of a home like atmosphere.

Long-Term Care Quality Assessment - 2017

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

Facility Name and Number: TURTLEFORD - 25146

Date of visit (DD/MM/YYYY): 16/02/17 20/04/17

Please list those from the RHA that attended:

Sept 6/16

- Director Rural Facilities
- Manager Environmental Services
- Regional Board member

Nov 1/16

- Director Rural Facilities
- Manager Environmental Services
- Regional Board member
- Meaningful Life Specialist

Jan 3/17

- No guests

May 2/17

- Director Rural Facilities

July 11/17

- Director Rural Facilities

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

Res Council highlights:

- External doors to large and small courtyards were upgraded to swipe card access. Small courtyard door updated with auto door opener. Doors working well and outdoor space is well utilized by residents and families.
- Large patio and small patio have both received rubberized paving. Surface is good for walkers and wheel chairs.
- Regular hairdressing services available.
- Residents and families appreciate the staff and summer student
- New wall-mount tv purchased for 200 wing living area. New replacement blanket warmer for 300 wing
- Ten ceiling track lifts were purchased for LTC. All rooms now have a permanent ceiling track lift.
- Residents enjoy regular outings, including to other communities (eg: Mervin for bowling, Edam for tea)
- Recreation provides multiple special events for residents & family during the year (eg: Strawberry Tea,

Christmas Parties, Festival of Trees, Resident & Family BBQs)

- Purchased additional supplies to enhance active games and art therapy programs
- A variety of faith-based services are provided by community churches/organizations throughout each month to meet resident needs.
- Eleven new MCL Encore beds were purchased for the facility. Most of these LTC beds were put into service on the LTC side of the facility. 20% of our mattresses are replaced annually.
- New integrated call system was put into service Sept. 2017.
- An eight hour LPN (1300 – 2130 hrs) was added to LTC staffing using Admin to Care reallocation dollars

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

- Broken UG sprinklers in back courtyard still not fixed
- Acute care is working with STARS, community stakeholders and Transport Canada to establish a helicopter landing pad. The pad will utilize rubberized rig mats.
- Roof leak affecting occupancy in room 309. Roof repair started Sept. 6, 2017.

Resident Council

- Concerns regarding food: meat too hard. Resident & Family Satisfaction Survey
- Explore ways to expand First Nations programming
- Increased Recreation funding to allow a weekend rec staff to be hired

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:

- Review methods for choosing, cooking and cutting meat according to resident preference and care requirements
- Engaging First Nations Liaison from Thunderchild First Nation
- No additional funding for recreation at this time. Volunteer base is low, but will continue to look for opportunities to enhance weekend activities.
- Purposeful Rounding is in place and a practice we are continually striving to improve upon.
- Survey results continue to be reviewed and discussed at daily huddles (1315 hrs).

Long-Term Care Quality Assessment - 2017

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|---|---|--|
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| <input type="checkbox"/> Keewatin Yatthe | <input type="checkbox"/> Prince Albert Parkland | <input type="checkbox"/> Regina Qu'Appelle |
| <input checked="" type="checkbox"/> x Prairie North | <input type="checkbox"/> Sun Country | <input type="checkbox"/> Sunrise |
| <input type="checkbox"/> Saskatoon | | |

Facility Name and Number: Villa Pascal 73580

Date of visit (DD/MM/YYYY): August 2016-July 2017

Please list those from the RHA that attended:

Karen Kindrachuk, Meaningful Life Specialist, Sheldon Gattinger, PNRHA Board Member

Claude Desnoyers (Villa Pascal Board Chair)

Gloria King, VP Integrated Health Services and Derek Miller, VP Finance and Operations attend annual Board meeting. Walk abouts have been done to assess areas of concern for the resident and staff environments.

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

- Residents feel that staff are respectful and kind. This is often noted a Resident Council meetings. They feel their needs are well attended.
- Food choices are generally good and dietary is responsive to requested changes e.g. a particular flavor of pizza.
- Table cloths and flavored water (cucumber, lemon, etc) have been enhanced the dining room experience.
- Residents feel they are getting enough to eat.
- Terrie Michaud, long standing Administrator at Villa Pascal has assisted with orientation for the new manager Heather Beatch. This will ease the transition for Residents and their Families.
- Each council meeting follows informal parliamentary procedure. Copies of the minutes are posted on the vis-wall.

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

- Dining room has been left open prior to meals to prevent bottle neck at the entrance. This has improved access and flow for Residents during meal times.
- Families drew attention to cushions on wheel chairs not being replaced properly following cleaning on nights. Education provided on placement of cushions on one way glide seats. This is a safety issue for fall prevention.

Please describe how 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:

- Resident Council is held monthly. Attendance is taken and all departments attend. At this meeting everyone has a voice. Residents are the focus and their concerns or, more often than not, positive remarks are made and heard.
 - Residents have an opportunity to ask questions or give feedback to each department. Examples include clutter in rooms, laundry bags for specific use, recent maintenance repairs, nursing and recreation events.