Report to 
Rapport au:

Community and Protective Services Committee
Comité des services communautaires et de protection
September 19 2019 / 19 septembre 2019

Submitted on September 5 2019
Soumis le 5 septembre 2019

Submitted by
Soumis par:
Donna Gray, General Manager/Directrice générale, Community and Social Services/Services sociaux et communautaires

Contact Person
Personne ressource:
Dean Lett, Director/Directeur, Long Term Care/Soins de longue durée, Community and Social Services/Services sociaux et communautaires
613-580-2424 ext./poste 44123, Dean.Lett@ottawa.ca

Ward: CITY WIDE / À L’ÉCHELLE DE LA VILLE
File Number: ACS2019-CSS-GEN-0013

SUBJECT: Long-Term Care 2019 Update on Consolidated Work Plan
OBJET: Mise à jour 2019 sur le Plan de travail unifié sur les soins de longue durée

REPORT RECOMMENDATIONS

That Community and Protective Services Committee receive this report for information.
EXECUTIVE SUMMARY
Assumption and Analysis
In 2018, City of Ottawa Long-Term Care Homes received feedback from four sources: Ministry of Long-Term Care inspections, a stakeholder engagement strategy, an independent third-party review and two audits by the City’s auditor general. In response to the feedback and recommendations from these sources, Long-Term Care staff developed an 84-item action plan with a focus on staffing, quality improvement, infrastructure, communication, resident care and service delivery. This plan was provided to the Community and Protective Services Committee in April 2018. Long-Term Care Services is committed to providing regular updates on the progress of the work plan and the actions taken to enhance safety, care and services to residents. This report outlines the progress of work to date.

To date, 69 (82%) of the 84 items are complete. Highlights include:

- adding 35 additional full-time equivalent personal support workers
- piloting new hiring processes
- enhancing training on abuse prevention
- updating medication processes and improving auditing procedures
- scheduling leadership rounds to provide greater management support
- increasing volunteer recruitment
- improving communication tools
- investing in new equipment – mechanical lifts, bathtubs and beds

Work in progress includes:

- enhancing dementia training
- determining best practices for personal support worker assignments
- reviewing the complaint process
- reviewing meal processes
- organizing educational opportunities for families
Many of the items that are currently in progress involve supporting residents living with dementia, which will be a key focus for the coming years. The City is researching innovative models of dementia care, enhancing staff dementia training, updating the design of dementia units based on best practices and creating a dementia-care strategy.

The work plan is expected to be completed in 2020.

BACKGROUND

The City of Ottawa operates four Long-Term Care Homes, with a total of 717 beds: the Peter D. Clark Centre, Carleton Lodge, Garry J. Armstrong Home, and Centre d’accueil Champlain.

Throughout 2017, the Ministry of Long-Term Care (MOLTC) completed inspections in the City of Ottawa Long-Term Care Homes. These inspections had findings of non-compliance in specific areas and required the homes to develop and implement compliance plans with specifically designed actions to correct these areas.

As part of these compliance plans, the City implemented a Stakeholder Engagement Strategy in the fall of 2017 to work with residents, families, staff and volunteers to obtain feedback on strategies to improve care, safety and services.

In the fall of 2017, an independent third-party consultant was engaged to complete a comprehensive review of the four homes. The independent reviewer presented his findings in the spring of 2018, outlining several influencing factors and recommendations to reduce the risk of incidents of abuse and neglect.

In the spring of 2018, the City’s Auditor General completed two investigations, one on medication management within the City’s Long-Term Care homes and one relating to the reporting of a resident incident. Following these investigations, the Auditor General provided several recommendations for improvements.

In response to the feedback from these four sources, City staff developed an action plan, which was shared with the Community and Protective Services Committee in April 2018.
discussion

Long-Term Services staff are continuing to work diligently through the 84-item Long-Term Care Consolidated Work Plan. As of the end of August 2019, 82% of items on the work plan have been completed.

The work is divided into five categories:

1. **Staffing** includes training, recruitment and healthy workplace
2. **Quality Improvement** includes reviews of practice and procedures and sector best practices, projects and pilots, process updates and governance/oversight
3. **Infrastructure** includes IT and capital investment
4. **Communication** includes communication for residents, families and staff
5. **Resident Care & Service Delivery** includes care planning and client service

1. **Staffing**

In the category of staffing, 23 items have been completed, representing 74% of the items in this area. An additional 8 items are in progress.

A lot of work has been done around staffing in the Homes. Based on the information that was presented in the Third-Party Review, Council approved 35 Personal Support Worker (PSW) FTEs in the spring of 2018 that were made permanent as part of the 2019 budget process. Part of this was the removal of all 4-hour PSW shifts and converting those into full 7.5 hour shifts. The remainder was the creation of new positions to support residents with their daily care needs.

In order to increase the complement of registered staff, eight registered practical nurses are being added to the service delivery model. To ensure that positions are being added where they will have the largest impact, they are being added gradually. As such, 50% of the positions have been added and are filled, and the others are currently being created and will be filled by the end of 2019. Although these permanent positions have not yet been created, the homes are using the additional hours of care that would be associated with these positions to ensure residents are receiving quality care.

A review of the management structure was conducted with other municipalities in 2018, to ensure the City has the necessary support for staff and residents. As a result of this review, two new program managers were hired to lead clinical quality improvement and consistent operational support. A review of management job descriptions was also
conducted to ensure that the City was screening for the correct levels of education and experience in our managers.

The final position is a business support officer that will assist in ensuring consistent hiring procedures using robust tools to recruit the best people to work for the City homes.

During the hiring process for these PSWs, Long-Term Care Services worked with Human Resources to pilot a new hiring process, in order to recruit PSW candidates who demonstrate empathy and compassion. Part of the pilot is to track the suitability and performance of new PSWs hired using these tools. This review will evaluate the effectiveness of these new hiring practices to determine whether to incorporate them into future competitions.

Improvements have been made to staff training. One hundred percent of all staff have received updated in-person training on the prevention of abuse and neglect. The updated annual training is scenario-based, and new scenarios are provided each year to help staff identify instances of abuse. The 2018 training included an additional module on incident reporting, so that staff can identify what they need to report to management in case of an incident and a section on whistle-blowing protection. For the 2019 training there is a section highlighting recent changes to Practice and Procedure 750.65 – Resident Abuse and Neglect, as well as information on the procedure for abuse investigations.

Enhanced supervision training has been introduced for supervisors, including registered staff. Improvements have been made to the staff orientation program, including additional testing for PSWs on the transfer of knowledge.

Long-Term Care is working to develop enhanced training for staff on dementia care. To date, a train-the-trainer program on the Gentle Persuasive Approach to resident care has been established to provide training for staff. Ninety-seven staff across the four homes received the training in 2018 and 2019. Additional peer-to-peer training in Excellence in Resident-Centred Care has been offered by trained PSWs to 292 of their colleagues. More training will be identified and rolled out as the Long-Term Care dementia care strategy is designed and implemented.

A plan to promote a healthy workplace across the four Long-Term Care Homes is being developed. A team has been established to work on attendance management and workplace health. Other initiatives will include the analysis of workplace injuries, prevention of violence in the workplace and mental health awareness. The department
will be piloting a mental health and wellness assessment tool – Guarding Minds - this fall to acquire data on which to base interventions and programs.

To support a healthy workplace, a Peer Support Network (PSN) pilot project has been launched at Centre d’accueil Champlain. This program provides staff with a confidential source of support, to promote employee wellness and productivity and acts as a bridge to further corporate resources. Following the evaluation of the 8-month pilot, the PSN may be implemented at other City Long-Term Care homes.

2. Quality Improvement
Twenty-five of the items in the Quality Improvement category have been completed, representing 89% in this area, with 3 more items in progress.

The management team has completed extensive work to review and implement the recommendations from the Auditor General around medication management, with 15 of the 16 items identified in the audit now completed.

As part of the response, management completed a thorough review of medication practices & procedures. Medication delivery processes have been updated to improve the security of medication in the Homes. The medication destruction and disposal process has been improved, with a new sign-off procedure when disposal bins are picked up and audits to ensure that lids are correctly fastened on the bins. Regular audits are now scheduled to ensure that nursing stations and medication carts are locked when unattended. All registered staff have received a refresher on the tracking of medications in the emergency supply box and the government pharmacy.

From the recommendations from the Auditor General investigation into the reporting of an incident, all seven items assigned to Long-Term Care have been completed. As a result of this investigation, the practices & procedures relating to Abuse and Neglect and Critical Incident System Reports have been revised and streamlined. In addition, all managers have received training on the duty to report resident incidents to the MOLTC. Also, a new incident intake checklist has been introduced to assist on-call managers to assess reporting requirements when staff report resident incidents.

In order to enhance governance and oversight in the home, scheduled leadership rounds have been formalized to provide greater management support to staff working on all shifts. In addition, a quality improvement team has been established to work on continuous quality improvement across the four homes. The primary goals for 2019 are to support frontline staff in quality improvement initiatives and to facilitate the Homes to move towards consistency, while ensuring compliance. The quality improvement team
has created a consistent audit schedule to review medication administration, fall incident reports and follow-up, emergency department visits, narcotic usage and restraint usage. Enhanced tracking and reporting tools have been developed to identify trends around medication incidents.

Meal processes are being reviewed across the four homes for opportunities to implement improvements based on feedback from residents, families, volunteers and staff. An update of the current processes for tracking and trending complaints has been identified as a way to recognize improvement opportunities.

3. Infrastructure
In the Infrastructure category, 7 items, representing 88%, have been completed. One item remains in progress.

In 2018, a new electronic Resident Care Information System, MED e-Care, was successfully implemented to support care planning for residents. This system is used to document relevant health care information for each resident. The second phase of this technology update, a new electronic Medication Administration Record (eMAR), was implemented in all four homes between February and April 2019. The eMAR increases the safety and efficiency of the medication administration process, reduces medication errors and makes it easier for staff to track and report the administration of medication.

A review and refresh of the 10-year capital plan was completed to ensure staff have the equipment and supports required to provide safe, quality, resident care. City Council approved $1 million in capital funding in 2018 to support the replacement of essential equipment. An additional $300 thousand in funding was allocated in 2019 for this purpose and has been used to purchase beds, lifts, shower chairs, and tubs.

The City’s Auditor General recommended that the City of Ottawa Long-Term Care Homes consider installing cameras in the medication rooms and government pharmacies to mitigate the risk of drug diversion. Staff have completed an initial analysis and are working with Corporate Security to determine the specific costing to proceed with implementing this recommendation. The recent public inquiry into long-term care also provided a recommendation that the MOLTC provide funding to Homes to install cameras in medication rooms.

One item from this area that is still in progress is a design review of dementia units to implement current best practices. The Homes have been updated to include décor changes and interactive activity stations, made to resemble bus stops or nurseries. More changes are planned for these units once the dementia strategy is finalized.
4. Communication
In the area of communications, 5 items are complete, or 71% of this category. Two items are still in progress.

As part of the improvements to communications between staff, the shift-to-shift report has been standardized to ensure that staff working on all shifts are up-to-date on residents’ status and aware of any recent issues.

Communication to our residents, their family members and staff is an important part of providing quality service. A new template has been developed for resident/family and staff newsletters. The newsletters also include a feedback mechanism that allows residents, families and staff to suggest ideas for future newsletter articles on subjects that are relevant to them.

Staff are currently updating the Long-Term Care pages on ottawa.ca as well as the information and admission packages that we provide to our residents and their families.

Between late 2018 and early 2019, each home held an open house session for families of current residents. This was an opportunity to educate families on the services provided, update them on changes within the homes and hear suggestions for improvements they would like to see. Further educational opportunities for families are planned in the near future.

5. Resident Care & Service Delivery
Nine items are completed in the category of Resident Care & Service Delivery, with one item in progress, representing a 90% completion rate.

To improve the consistency of services provided to residents, an updated Kardex tool has been provided for each resident. This tool is a personalized summary of the resident’s care needs that allows staff to access key information while they are providing care.

A Personal Support Worker floater position has been introduced in order to have replacement staff available to fill shifts so there is a full complement of staff on each shift. The floater also supports our initiative to improve service delivery and consistency of resident care. To further improve service delivery, improvements have been made to the practice of reviewing rosters daily to ensure the consistency of staff.

As part of a review of the number of secure units currently in the Homes, each Home identified the need for additional staff hours. Therefore, some of the additional PSW
hours from the 35 new FTEs have been allocated to the secure units in each Home to improve resident safety and staffing levels in these areas.

The recreation managers have made great efforts towards improving volunteer recruitment and there has been an increase in the number of active volunteers. In 2018, 646 volunteers provided 45,605 hours of support across the four Homes.

Tools have been developed to support staff to provide appropriate care for residents with dementia of various cultural backgrounds and to promote cultural diversity awareness in the homes. Staff are working with families to ensure that residents’ specific cultural needs are reflected in their care plans.

An upcoming project is to look at the services the Homes provide and develop program descriptions that outline our services. This will set clear directions for staff and expectations for residents and their families.

**Upcoming Priorities:**

Dementia care will be a key focus for Long-Term Care Services during the next several years and will include the creation of a dementia-care strategy. The provision of person-centred dementia care has been a recent focus within the Long-Term Care sector in Ontario and across Canada. Approximately 80% of residents living in our homes suffer from some form of dementia. The City’s Long-Term Care Services team is conducting research into various innovative models of care to identify opportunities to enhance our services to residents with dementia. The City has representation on the Transformation of Long-Term Care work group in the region to share best practices for residents living with dementia.

A Dementia Care Strategy steering committee has been formed with representation of staff from across the four homes. The administrator leading the steering committee is currently participating in a workshop offered through “Dementia Care Matters,” a three-week training that focuses on the principles of the Butterfly Approach. Each home will have a working group that will support the implementation of the dementia care best practices as determined by the steering committee.

Many of the work items that are still in progress connect to this ongoing work to identify and implement best practices in dementia care. Upcoming work items in this area include additional dementia training for staff, work to ensure that staff assigned to secure units are the best fit, and a review of the current layout and design of the units.
CONCLUSION

Several more items are targeted for completion in 2019, while some of the items will be completed in 2020. Long-Term Care Services will continue to complete the items identified on the work plan, while staff will also focus on initiatives that link to other priorities or respond to changes in the sector.

Long-Term Care Services will continue to work on these and other initiatives to ensure that the City Homes provide safe, quality care and services to residents.

RURAL IMPLICATIONS

There are no rural implications.

CONSULTATION

The City implemented a Stakeholder Engagement Strategy in the fall of 2017 to work with residents, families, staff and volunteers to obtain feedback on strategies to improve care, safety and services. Recommendations from this strategy were incorporated into the work plan.

COMMENTS BY THE WARD COUNCILLOR(S)

City-Wide Item.

ADVISORY COMMITTEE(S) COMMENTS

No comments.

LEGAL IMPLICATIONS

There is no legal impediment to receiving the information contained in this report.

RISK MANAGEMENT IMPLICATIONS

There are no risks associated with this report.

ASSET MANAGEMENT IMPLICATIONS

N/A

FINANCIAL IMPLICATIONS

There are no financial implications associated with the report recommendations.
ACCESSIBILITY IMPACTS

There are no accessibility impacts.

TERM OF COUNCIL PRIORITIES

There are no direct impacts on the existing Council priorities.

SUPPORTING DOCUMENTATION

Document 1: Long-Term Care Consolidated Work Plan Status Update – September 2019

DISPOSITION

Long-Term Care Services staff will continue to implement the items that are outstanding on the consolidated work plan.