



Royal Rose Place

Jarlette Health Services Long Term Care

Final Quality Report for 2022

Overview

Jarlette Health Services is committed to making an outstanding difference in the lives of others. Royal Rose Place is one of fourteen Long Term Care Homes proudly owned and operated by Jarlette Health Services, which boasts a 50 year heritage of excellence in resident-centered care and a commitment to strong values of respect, accountability, responsibility and passion. We work tirelessly to provide a dynamic Long Term Care (LTC) experience to our residents, family members, staff and the communities we serve.

In December 2022 - we were thrilled to be awarded a full 3yr accreditation from CARF which reflected the hard work and dedication of our team. We were happy to share these results with our residents, family and other stakeholder groups and involved them in our CARF prep as well as our survey days.

Resident Care

Understanding the challenges that the pandemic has brought to LTC homes, we identified that we had to strengthen our foundation, tools and processes to ensure that our team continued to have the resources needed to ensure that our residents received the best care and services possible.

Undertaking a full review of all **Resident Care Policies** to reflect the new *Fixing Long Term Care Act* (Act) and its associated *Regulations* - this work began in January, 2022 and has resulted in the creation of new Manuals and updated policies for:

1. Culinary
2. Life Enrichment
3. Infection Prevention and Control (IPAC)
4. Quality + Risk Management
5. Resident Care.

This work has allowed us to ensure our resident care processes are streamlined, resident focused and lead to high quality care and services. We strive to be nimble and responsive to changes in direction from Government or best practices and continue to always look for the next best way to deliver our services.

Our **Surge** electronic education platform has been updated and we have created new monthly calendars that our Staff Educators can use every month to ensure that all staff are current and up to date with their learning. This ensures that our team can meet the standards required by the Act and Regulations but also that they are consistently learning and keeping their knowledge with standards of resident care are always at the forefront. In late 2022 we added a new package to support the educational requirements for the Medical Directors, Physicians and Nurse Practitioners.

Introduction of a new **Auditing and Inspection Guides (Inspection Guides)schedule, forms and process** - has allowed us to ensure that we are continually monitoring all aspects of our services and making corrections when deficiencies are identified or building on positive work where highlighted. This was introduced in May, 2022 and updated in August when the Ministry switched from Inspection Protocols to Inspection Guides and we expect that this will help us move forward to improving our focus on our residents and services surrounding them. Our goal is to engage residents and families in data review, improvement planning and evaluation as part of our open and transparent approach to being a home.

PointClickCare (PCC) refresh and rebuild - as we reviewed our electronic documentation system it became clear that our 20+yr old system needed a major refresh to ensure that our teams can continue to comply with the requirements of legal documentation so that our resident's care needs are accurately reflected and that care can be provided to meet each individual resident's needs. This work began in February, 2022 and has included a clean up of the back end configuration and security user roles. New streamlined Assessments and Progress Notes have been created. In late 2022 we introduced the IPAC module to our teams to electronically manage trending and tracking of all infections. We will be introducing the AMPLIFY project in 2023 which is a project which connects hospitals to LTCs to share documentation directly into the residents PCC chart. In early 2023 we will launch a new Care Plan library and new Point of Care library to allow our teams to more effectively document and chart the care for our residents every day while maintaining an individual resident focus. In late 2022 and on into 2023 - our home will be transitioning to updated software to manage medication administration. In mid 2023 we will also introduce Practitioner Engagement software which will ensure our Physicians, Medical Directors and Nurse Practitioner can prescribe electronically and complete their required documentation in a more effective manner.

Mealsuite/Menustream

In 2022 we recognised that we needed to improve some of the processes around our meal services and in 2023 we will be implementing Menu Stream software to our team which will improve the flow of information from different teams around residents food and fluid needs to ensure that they always have what they want and need from our team.

Antipsychotic medication use or more appropriately, use of antipsychotic medications only for residents who meet the approved definition for use of these high risk medications. In 2021 our actual number was 16.97 and we set a target for 2022 of 14.00. At the end of 2022 our actual was 19.56, therefore we did not achieve our target goal, however we were able to remain below the provincial average of 20.4.

In 2022 we opened our third floor addition and welcomed 64 residents to our home. Prior to the third floor opening in March 2022, resident diagnoses and medication reviews were completed for the current residents living within the home, however, with the influx of admissions, we were unable to reach our target goal by the end of the calendar year. In addition to our third floor, we also welcomed an additional 44 residents, to reach a total of 108 new admissions. Upon evaluation of new admission medical demographics and in collaboration with our pharmacy team, many residents who were admitted had a previous prescription of antipsychotic medication without diagnosis. In order to provide a stable transition, many pre-existing prescriptions remained in place and we continued to monitor their transitions to the home. In 2022, Royal Rose Place experienced our second highest number of admissions since opening in 2016.

In 2023, we will be able to refocus on improving this quality indicator as we have successfully completed opening the third floor addition and have been able to build rapport and support with the transition of our 108 admissions. We will audit resident diagnoses, medications and documentation to ensure accuracy of information. In addition, we will continue to train our interdisciplinary team in Gentle Persuasive Approach Classes (GPA). Throughout 2022, we were able to train over 25 front line team members and all leadership team members. With this achievement, we understand that there is more education to be delivered and are also committed to continuing this training.

Resident and Family Relations

The use of the **One Call system** has enhanced our ability to communicate large scale and consistent messaging in times where concise and direct communication have been much needed. The pandemic has allowed us to explore alternative ways of communicating and so far we are impressed with how easily we can communicate changes or updated information to a large group through the use of One Call.

We have also introduced a new **Care Conference format** in PCC to allow our teams to capture fully the care conference conversations and information shared between staff and families and residents. This format allows us to be more accurately documenting and capturing the aims, wishes and goals of the resident and to discuss collaboratively how we as a team will get there.

We began to focus our work around our **Palliative Care** services and as part of this we educated our teams on **Advanced Care Planning** and Consent and Capacity. We also introduced the POET form in PCC to allow teams to document residents wishes and values.

Resident and Family Satisfaction continues to be a focus for our home. In 2021 our actual number was 100.00 and we set a target to maintain this score of 100.00 for 2022. At the end of 2022, our likelihood to recommend score was 81.3 and we did not achieve our goal.

Our Resident/Family and Essential Caregiver Satisfaction Survey is carried out annually in the month of November. Results are shared with both Resident and Family Councils thereafter and members are involved in discussions about any actions the home or organization is taking. Councils are asked to review and provide input on changes to the next survey tool questions. Other work identified throughout the year to improve quality within the home is shared by the administrator through the One Call notification system, postings on information boards, the home's monthly newsletter, Town Hall meetings or at the Residents and Family Council meetings as they arise.

Our areas for improvement are measured, monitored and communicated throughout the year at a variety of levels which include core program committees, Professional Advisory Committee and Quality Council meetings, Resident and Family Council meetings and at home level and corporate level meetings such as Administrator/Director of Care weekly meetings as well as Goal Setting meetings and Operational Planning meetings.

A significant impact of resident satisfaction was the numerous COVID-19 outbreaks declared by Public Health throughout the year. Declarations of outbreaks places restrictions on residents activities of daily living, limits general visitors into the home and segregates residents and team members to home areas. While it is understood these measures are in place to protect the physical health & well-being of residents, it also can impact their overall satisfaction.

The outbreaks also impacted the type of participation in Residents' Council. Meetings became a blend of in-person and virtual forums to allow participation, but residents often expressed their wishes to return to 'pre-COVID' routines and practices. In addition, previously held events/programs such as Residents' Council Coffee Cart, or community fundraisers were canceled due to outbreak and pandemic restrictions.

We also welcomed over 108 new residents to our Home. There is often a transitional period in which residents and families as many residents were hospitalized prior to their admission and hoped to be able to home in the community, not into long-term care. Our Resident and Family Services Coordinator and Social Worker support during this transitional period and inform residents and their loved ones of the many opportunities within the home.

We were also unsuccessful in relaunching the "Through our Eyes Program" as we continued to grow as a community and shift to a home culture of 96 to 160 residents as well as the impact of the outbreaks.

In 2023, we are dedicated to improving resident and family satisfaction. As a starting effort, we relocated our “Meet our Team” wall to be closer to the main entrance and have anonymous suggestion boxes located throughout the home for feedback and will continue to make changes throughout the year.

Involvement in plan of care - in 2021 our home scored 100.00, with a target for 2022 to be maintained at 100.00. At the end of 2022 our actual score was 75.9 and therefore did not meet our target goal.

When welcoming our new residents in 2022 Royal Rose Place discussed plan of care, multidisciplinary care conferences and resident preferences. However, the admission process is an emotional experience for both the resident and family, and they often need continual support throughout this new chapter of their lives. It has also been noted that many residents declined the right to participate in their 6 week post admission care conferences where the plan of care was reviewed. These meetings often focused on providing a better understanding of what long-term care can provide and provided support during this adjustment.

In 2023, we will continue to focus on improving this indicator.

Resident Experience / comfort or quality of Life

Emergency Department transfers - we as a team understand that there are times when residents require transfer to hospital however our focus is on residents who could have avoided a transfer to hospital. In 2021, our actual number was 16.10 and we set a target of 12.00 for 2022. At the end of the year, our actual number was 16.67 and while remaining below our LHIN average, did not achieve our goal.

Upon admission and as required, residents & family members are informed of the services available within the home by our nursing team, social worker and resident and family services coordinator. When a health situation arises that may require further assessment, prior to transferring to hospital, our registered staff completed on-site assessments, contacted the physician for further support and discuss the situation with the resident/substitute decision maker. We also maintain accommodations for four bariatric residents who also frequently requested transfers to hospital due to the complexity of their healthcare needs. It has been found that despite these health teachings, resident/substitute decision maker are insistent on being transferred to hospital and therefore Royal Rose Place follows their wishes.

In addition, the Nurse Practitioner assigned to Royal Rose Place was on a leave of absence for 2022, in which these services were unable to be completely replaced by the LHIN. In the past, the NP provided extra support to help reduce ED transfers.

Therefore, while we navigated into a larger home model of 160 beds in 2022, we did see an increase in ED transfers. With this acknowledgement, Royal Rose Place remains dedicated to improving this

indicator in 2023 with team members utilizing the SBAR tool to support communication and providing education to residents and family of goals of care upon their admission to the home.

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