



BACKGROUND

At the North Shore Health Network Long-Term Care Home, we pride ourselves on maintaining a high quality level of care which is driven by professionalism, integrity and respect. As an organization we thrive to maintain a safe and comfortable home-like environment for our residents which provide a sense of privacy, dignity and security. We are made up of a multi-faceted team including registered staff, physicians, nurse practitioner, social work, physiotherapy, dietitian, personal support workers, housekeeping staff, food services workers, volunteers, essential caregivers and students. Together, we will maintain open communication and transparency to better the development and delivery of holistic care to our residents.

SURVEY DETAILS

Total # of Surveys Completed: 17/32= 53% (LTC / ELDCAP Units)

Resident Eligibility: Must have a Cognitive Performance Scale of 3 or lower to complete the survey. The Cognitive Performance Scale (CPS) is used in the RUG-III Classification system to measure a resident's cognitive performance. The RUG-III Classification system uses the CPS scale (0 - Intact, 1 - Borderline Intact, 2- Mid Impairment, 3 - Moderate Impairment, 4 - Mod. Severe Impairment, 5 - Severe Impairment, 6- Very Severe Impairment) to identify residents who demonstrate moderate to severe cognitive impairment as a basis for classification in the Impaired Cognition RUG-III groups. CPS scoring is performed on all residents on a quarterly basis.

Surveys Conducted By: Charlyn Beneteau, Clinical Quality, Communication and Education Admin Lead, John Jones (LTC COVID Clerk)

Methodology: Surveys were conducted with Residents who were able to actively participate. A satisfaction scale of faces (similar to the pain scale) was used to resemble the possible answers (*Always, Often, Sometimes, Rarely, Never*). Residents were able to answer verbally, non-verbally through the visual scale, or in writing.

FOCUS FOR IMPROVEMENT / PRIORITIZATION

LTC Resident Satisfaction Surveys are completed and utilized to collect and review feedback on our everyday responsibilities, such as; communication, nursing care, professional services, management of medical conditions, general safety, daily resident care, mealtimes, activities & exercise, special events, maintenance of the home, management of the general environment & resident rooms, etc. The survey provides us with valuable information and ideas on how to improve and maintain all aspects of care. Evaluation & follow up with residents throughout the year will allow us to adapt and make changes to better serve our client population.

Consider Strategies for “Holding the Gains”:

- 1) Food – taste
- 2) Food – variety of foods served
- 3) Food –portion sizes
- 4) Quality of Care– residents feel safe here
- 5) Quality of Care – personal care and health care needs are met
- 6) Linen – clean and in good condition
- 7) Overall Satisfaction – quality of care and services

Focus for Improvement:

- 1) Food–how the food looks
- 2) Food –Temperature of the food
- 3) Quality of Care – engaging residents in “having a say in their care.”
- 4) Environment – room temperature



LONG-TERM CARE RESIDENT SATISFACTION SURVEY – ACTION PLAN

Survey Conducted: November 2022

Plan Created: January 2023

Plan Reviewed: May 2023

ACTION PLAN

GOAL	FOCUS	ACCREDITATION STANDARD	LTC ACT OR REG	ACTIONS / DETAILS	LEAD	TIMELINE	PERFORMANCE MEASURE
"Holding the Gains"	1) Food – Taste	<p>LTC 10.3 - A pleasant dining experience is facilitated for each resident.</p> <p>LTC 10.4 - Feedback regarding individual food preferences and nutrition requirements is gathered from the resident and family, as needed.</p> <p>LTC 10.5 – Residents are involved in menu planning.</p>	<p>REG</p> <p>(3) The licensee shall ensure that all food and fluids in the food production system are prepared, stored, and served using methods to,</p> <p>(a) preserve taste, nutritive value, appearance and food quality; and</p>	<p>-Recruited Food Service Manager</p> <p>-Recruiting for stabilizing staffing</p> <p>-Ensure following standardized recipes and production plans.</p> <p>(Complete purchasing services)</p>	M.Kubatlija S.Coultis S.Coultis	Complete Ongoing Ongoing	<p>Q: "Do you like how the food tastes?"</p> <p>2021: 79.2% (Always + Often)</p> <p>2022: 88.2% (Always + Often)</p>
	2) Food – Variety			<p>-Continue "cruise destinations" to promote resident input into menu and pleasurable dining.</p> <p>-Provide quarterly theme meals – to fill gaps between holiday meals already celebrated.</p> <p>-Continue Food Committee as part of Monthly Resident Council Meeting.</p> <p>1) Review menu / resident's choice menu options and document in minutes.</p>	Ch.Trivers Ju.Lemieux Ch.Trivers Ch.trivers Ju.Lemieux K.Woods S.Coultis	Ongoing Quarterly Quarterly Monthly	<p>Q: "Are you happy with the variety of foods provided?"</p> <p>[2021: 83.3% (Always + Often)]</p> <p>[2022: 100% (Always + Often)]</p>
	3) Food - Portions			<p>-Portion sizes are based on FLTCA</p> <p>-Portions are part of care plans</p> <p>-New menu on the radar, all specific (software)</p>	Ch.Trivers / S.Coultis	Ongoing Ongoing Sept 2023	<p>Q: "Are you happy with the portion sizes served?"</p> <p>2021: 80% (Always + Often)]</p> <p>2022: 100% (Always + Often)]</p>
	4) Quality of Care – residents feel safe here.	<p>LTC 2.5 – The physical security of residents is protected.</p> <p>LTC 16.0 -- Resident and team safety is promoted within the service environment.</p>	<p>ACT</p> <p>The fundamental principle to be applied in the interpretation of this Act and anything required or permitted under this Act is that a long-term care home is primarily the home of its residents and is to be</p>	<p>-Installation of maglocks and control measures to control traffic flow (e.g. in an outbreak situation / wandering resident.)</p> <p>-Unit is secure by locked doors</p> <p>-Continue active screening of visitors upon entry, staff passive screen before every shift (continue to follow covid directives)</p>	J.Hallett J.Hallett R.Paquette R.Paquette M.Labine L.thompson	ongoing Ongoing Completed	<p>Q: "Do you feel safe here?"</p> <p>[2021: 92% (Always + Often)]</p> <p>[2022: 94.12% (Always + Often)]</p>

		operated so that it is a place where they may live with dignity and in security, safety and comfort and have their physical, psychological, social, spiritual and cultural needs adequately met.	-Continue rapid swabs based on policy -Ongoing BSO support ,1 on 1 as needed		Ongoing Ongoing	
5)Quality of Care – personal care needs are met.	LTC 8.10 – Each resident’s preferences and options for services are discussed as part of the assessment, in partnership with the resident and family.	REG 30. (1) Every licensee of a long-term care home shall ensure that, (a)a care conference of the interdisciplinary team providing a resident’s care is held within six weeks following the resident’s admission and at least annually after that to discuss the plan of care and any other matters of importance to the resident and their substitute decision-maker, if any;	-Care conference format is a multidisciplinary approach. Meet 6 weeks post admission, yearly and as needed basis	L.Thompson C.Trivers M.Seguin	Ongoing	Q: “Are your personal care needs met? (e.g. bathing, dressing, personal hygiene...)” [2021: 76% (Always + Often)] [2022:100%% Always=Often)]
6)Linen – clean and in good condition.		ACT 19 (1) Every licensee of a long-term care home shall ensure that, (b)there is an organized program of laundry services for the home to meet the linen and personal clothing needs of the residents; and	-New washer and dryer on unit -Switched to soap pods to provide consistency	J.Hallett/ M.Kubatlija	Complete Complete	Q: “Is your linen clean and in good condition?” [2021: 76% (Always + Often)] [2022: 100% (Always +Often)]
7)Overall Satisfaction – quality of care and services	LTC 8.0 - Care plans are developed in partnership with the resident and family based on a comprehensive assessment. LTC 9.0 - Care plans are implemented in partnership with residents and families.	ACT 19. Every resident has the right to, I, participate fully in the development, implementation and review of their plan of care	-Extending shifts, offering additional hours to increase overall staffing hours for provision in resident care. -RNAO Best Practice Guidelines Project. - Overall goal within the next 2-3 years to become a “Best Practice Spotlight” organization. - Immediate focus on oral care.	L.Thompson L.Thompson	Ongoing (2/4 year project) Ongoing Long-Term Project Ongoing	Q. “Overall, are you happy with the quality of care and services here?” 2021: 76% (Always + Often) 2022: 88.2%(Always +Often)

		LTC 10.0 - The needs of the whole person, including but not limited to their spiritual, cultural, social, and recreational needs are addressed by the team in partnership with the resident and family.		-Palliative Care Education (RPN Lead) – education sessions for workers / families / residents & advanced care planning. -Programs: Additional permanent part Time role to be trained. And 7 days a week structure	L.Thompson L.Thompson	Ongoing Complete	
Focus for improvement	1)Improving resident satisfaction regarding how the food looks	LTC 10.3 - A pleasant dining experience is facilitated for each resident. LTC 10.4 - Feedback regarding individual food preferences and nutrition requirements is gathered from the resident and family, as needed. LTC 10.5 – Residents are involved in menu planning.	REG (3) The licensee shall ensure that all food and fluids in the food production system are prepared, stored, and served using methods to, (a) preserve taste, nutritive value, appearance and food quality; and	-menu software to get up and running - show plates will be included Working with new software to have visual cues -education with cooks and food service staff -request feedback at resident council meetings -follow up on complaints - on boarding new manager for food services -Food audits (1 x week)	S.Coultis (All below)	September 2023 Ongoing Ongoing Ongoing Ongoing Complete Ongoing	Q "Do you like how the food looks?" 2021: Always: 64% Often: 12% Sometimes 12% Rarely 8% 2022: Always: 70.59% Often: 5.88% Sometimes: 17.65% Rarely 0%
	2)Improving resident satisfaction regarding food temperature.	LTC 10.3 - A pleasant dining experience is facilitated for each resident.	REG (6) The licensee shall ensure that the home has, (b) institutional food service equipment with adequate capacity to prepare, transport and hold perishable hot and cold food at safe temperatures; and 79.5 Food and fluid being served at a temperature that is both safe and palatable to the residents.	-temperature monitoring during cooking, during hot holding of food, before during and after meals -hot plate servers when resident being fed in room with thermal covers -cambro for tray service during outbreaks (hot plate in iso situations with Cambro cover) -improved soup service distribution (increased the hot holding temperature in steam table and reinforced with staff not to dish it out too early) -Develop a LTC meal service committee	L.Thompson S.Coultis S.Coultis S.Coultos Ch.Trivers S.Coultis L.Thompson	ongoing Complete Complete Complete Review in fall	Q. "Are you happy with the temperature of the food served? (e.g. cold foods cold, hot food hot). 2021: Always 44% 32% Often, 16% Sometimes 4% Rarely 2022: 70% Always, 12% Often, 6% Sometimes, 0% Rarely, 6% Never

	3)Engaging residents in “having a say in their care.”	LTC 13.3 – The flow of resident information is coordinated among the team members and other organizations, in partnership with the resident and in accordance with legislation.	ACT (5) The licensee shall ensure that the resident, the resident’s substitute decision-maker, if any, and any other persons designated by the resident or substitute decision-maker are given an opportunity to participate fully in the development and implementation of the resident’s plan of care.	-Review of Admission process to ensure it is resident & family-centred. -Huddle Discussion re: Engaging the Residents -Revising Resident Council Agenda (standing items: quality improvement updates, satisfaction, engaging the residents.)	L.Thompson M.Seguin C.Trivers Ju.Lemieux	Review in the fall Fall 2023 Complete	Q. “Do you have a say in your care?” 2021: 44% Always, 16% Often 20% Sometimes, 8% Rarely Never 0% 2022: 70.1% Always, 6% Often, 6% Sometimes, 0% Rarely, 6% Never,
	4)Improving Resident satisfaction regarding facility temperature and comfort levels.	LTC 2.4 – The physical space is designed with input from residents and families and is safe, comfortable, and reflects a home-like environment.	REG 24. (1) Every licensee of a long-term care home shall ensure that the home is maintained at a minimum temperature of 22 degrees Celsius.	-Physical temperature recorded electronically (new process in January 2022). Alarm set point. -New control valves is installed -Working on plan to have manual override and control of room temperatures -Doing weakly audit of room temperatures -Maintain temperature according to Regulations. (Exceeding minimum temperatures). -Adding heating coil to room 210 (pilot) -Changing the thermostat in 200 halls	J.Hallett	Ongoing Complete Complete Ongoing Ongoing August 2023 Sept 2023	Q. “Do you like the temperature of your room?” 2021: 48% Always, 12% Often, 12% Sometimes 8% Rarely, 12% Never 2022: 64% Always, 17% Often, 12% Sometimes 0% Rarely, 7% Never

Leads:

Melanie Kubatlija (M.Kubatlija) Vice President of Environmental Services & Chief Risk and Communications Officer

Christine Trivers (Ch.Trivers) Registered Dietitian

Shannon Coultis (S.Coultis) Food Services Manager

Julia Lemieux (Ju.Lemieux) Rec and Rehab Assistant

Katie Woods (K.Woods) Rec Aid

Lisa Thompson (L.Thompson) Nurse Manager

Jeff Hallett (J.Hallett) Maintenance Lead

Roberta Paquette (R.Paquette) IPAC Lead

Chantalle Trivers (C.Trivers) Quality Lead and Coordinator

Monique Labine (M.Labine) BSO Lead

Monica Seguin (M.Seguin) RAI Coordinator

Legend:

QOC- Quality of Care

PHISIO- Physiotherapy

ACT- Activities

ENV- Environment

FOOD- Food Services

LINEN- Linen Services

ADMIN- Management

OSAT- Overall Satisfaction