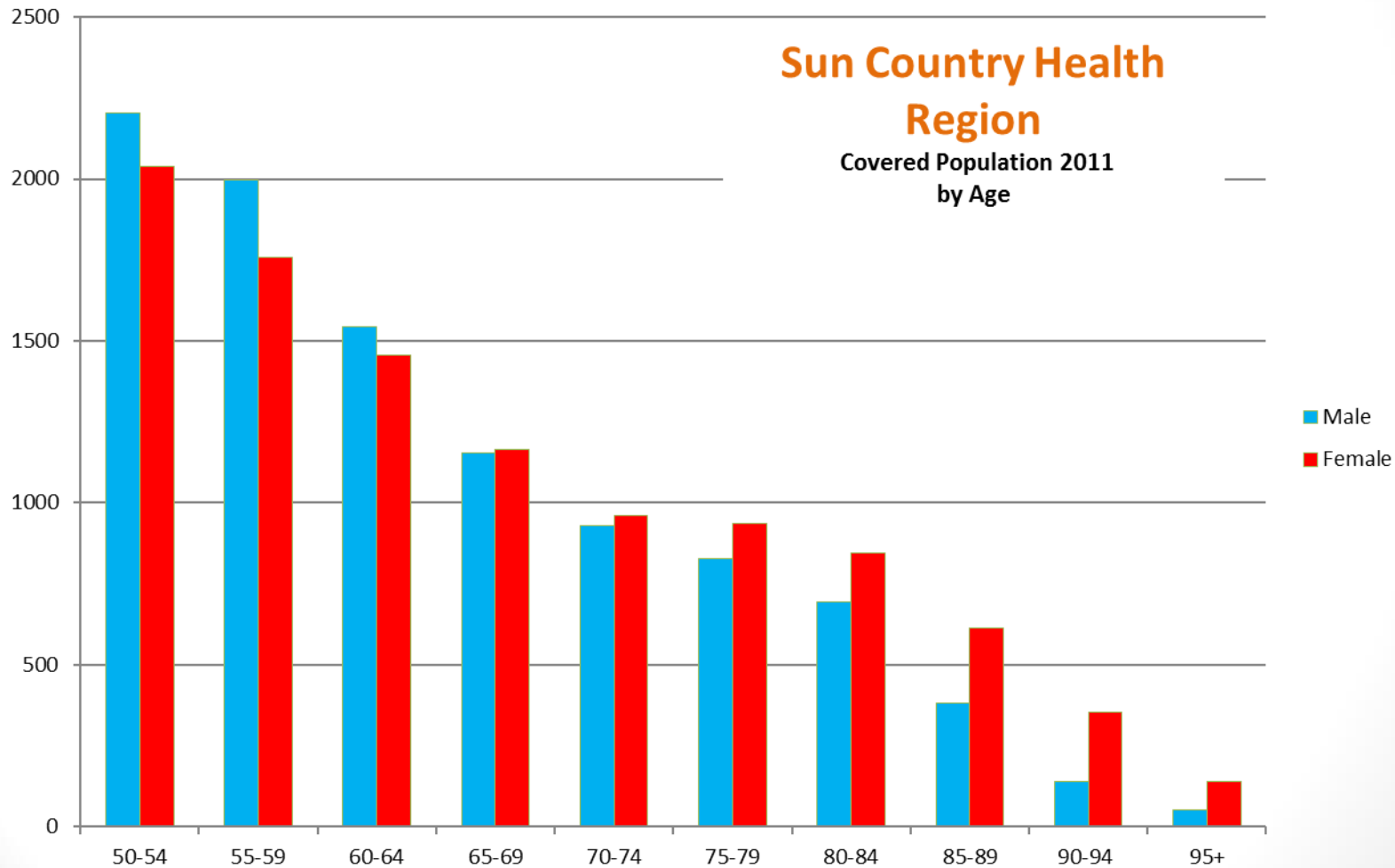
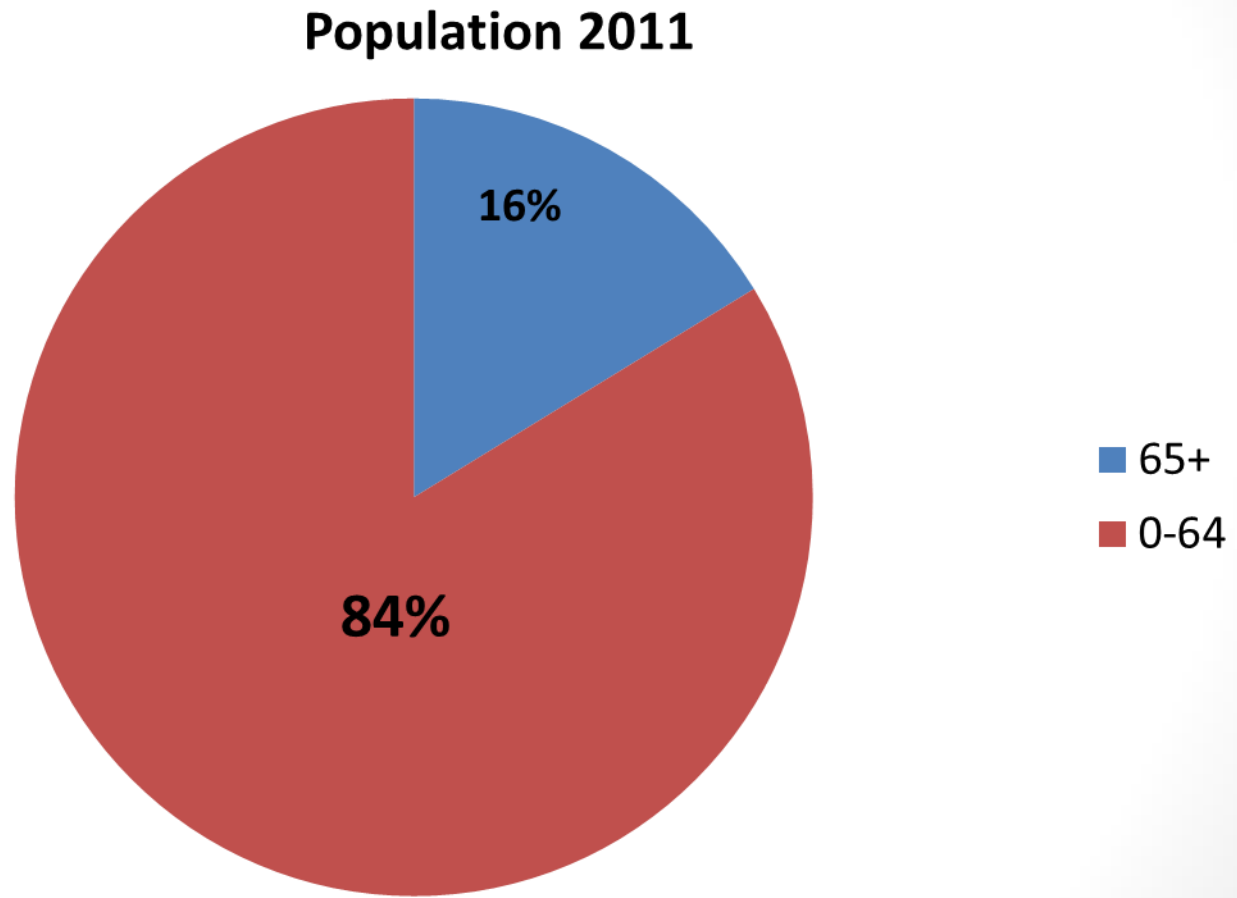


Sun Country Health  
Region  
Long-Term Care

# SCHR Population 50 years and older



# SCHR % of Population over 65



# Long-Term Care

“personal care or nursing care provided to individuals who are unable to care fully for themselves and require prolonged care on a residential basis, whether temporary or permanent”

The Regional Health Services Act – The Facility Designation Regulations

# Long-Term Care Funding

- Is not a publicly-insured health service under Canada's universal health care system
- In Saskatchewan, as in other provinces and territories, long-term care is publicly subsidized
- Residents pay fees based on their annual income at rates set out in The Special-care Homes Rates Regulations, 2011
- In 2014, the minimum resident charge under these regulations was \$1,049/month and the maximum was \$1,995/month

# Sun Country Health Region

- SCHR has 18 Long Term Care Facilities
- Total of 642 Long Term Care beds



# Long-Term Care Placement

- Based on a regionally standard assessment process
- Beds are offered based on need and length of wait on list
- May be offered a non-preferred location if no bed available in preferred location

# RAI - MDS

- Resident Assessment Instrument – Minimum Data Set
- Nationally utilized system
- Assess clients on admission to services and at least every three months thereafter
- Utilized in SCHR in Long Term Care and Home Care



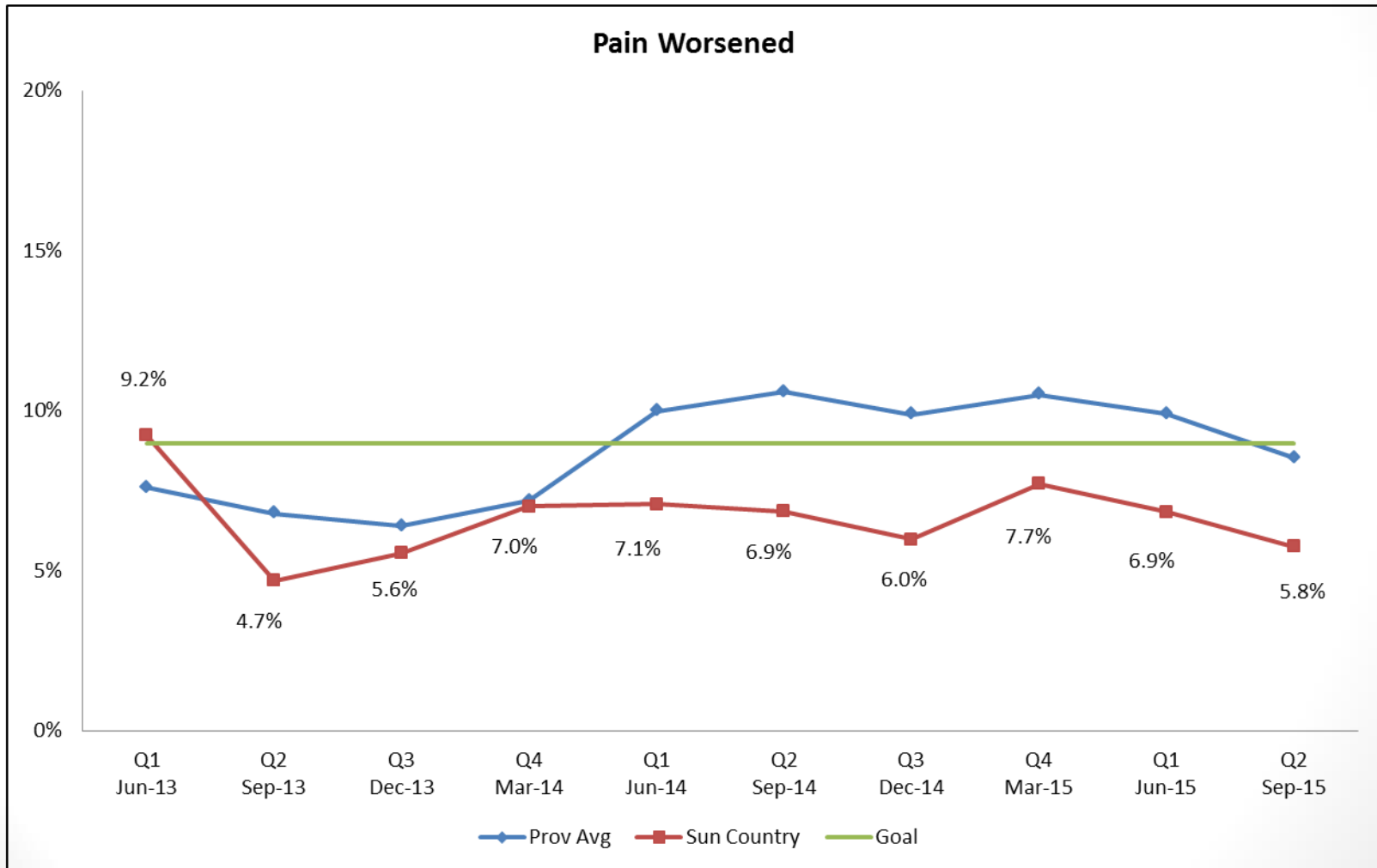
# Benefits of RAI-MDS

- Standardized assessment that flags concerns and complex care
- Enhances care processes & improves quality by delivering clear information
- Provides consistent & comprehensive data for benchmarking and policy development at facility, regional, provincial and national levels

# Saskatchewan LTC MDS Indicators

- Daily Physical Restraints
- Antipsychotics without a Diagnosis
- Residents Whose Pain Worsened
- Newly Occurring Stage 2-4 Pressure Ulcer
- Stage 2-4 Pressure Ulcer that Has Worsened
- Residents Whose Bladder Incontinence Worsened
- Residents Who Fell in the Last 30 Days

# 2015-16 Quarter 2



# 2015-16 Quarter 2

Residents Whose Pain Worsened	Percentage of Residents Whose Pain Worsened	Number of Residents Whose Pain Worsened	Denominator for Residents Whose Pain Worsened	Number of Assessments Completed in the Quarter
<b>2015-16 Target</b>	9.00%			
<b>All Regions - Provincial Average</b>	8.53%	581	6,809	8,088
<b>Sun Country</b>	5.77%	30	520	628
73537: NEWHOPE PIONEER LODGE-STOUGHTON	23.53%	4	17	19
73072: LAMPMAN HEALTH CENTRE	20.00%	2	10	21
73530: MAINPRIZE MANOR & HEALTH CENTRE-MIDALE	15.38%	2	13	15
73545: WILLOWDALE LODGE-KIPLING	15.38%	4	26	34
73535: MOOSE MOUNTAIN LODGE-CARLYLE	11.76%	4	34	41
73020: CORONACH & DISTRICT HEALTH CENTRE	11.11%	1	9	10

# Purposeful Rounding

- Implemented in 1/3 of Special Care Homes in the region by March 31, 2016
- Was a Provincial Tool Kit
- Goal was that each resident would have a purposeful interaction at least hourly
- Region initiated a small working group

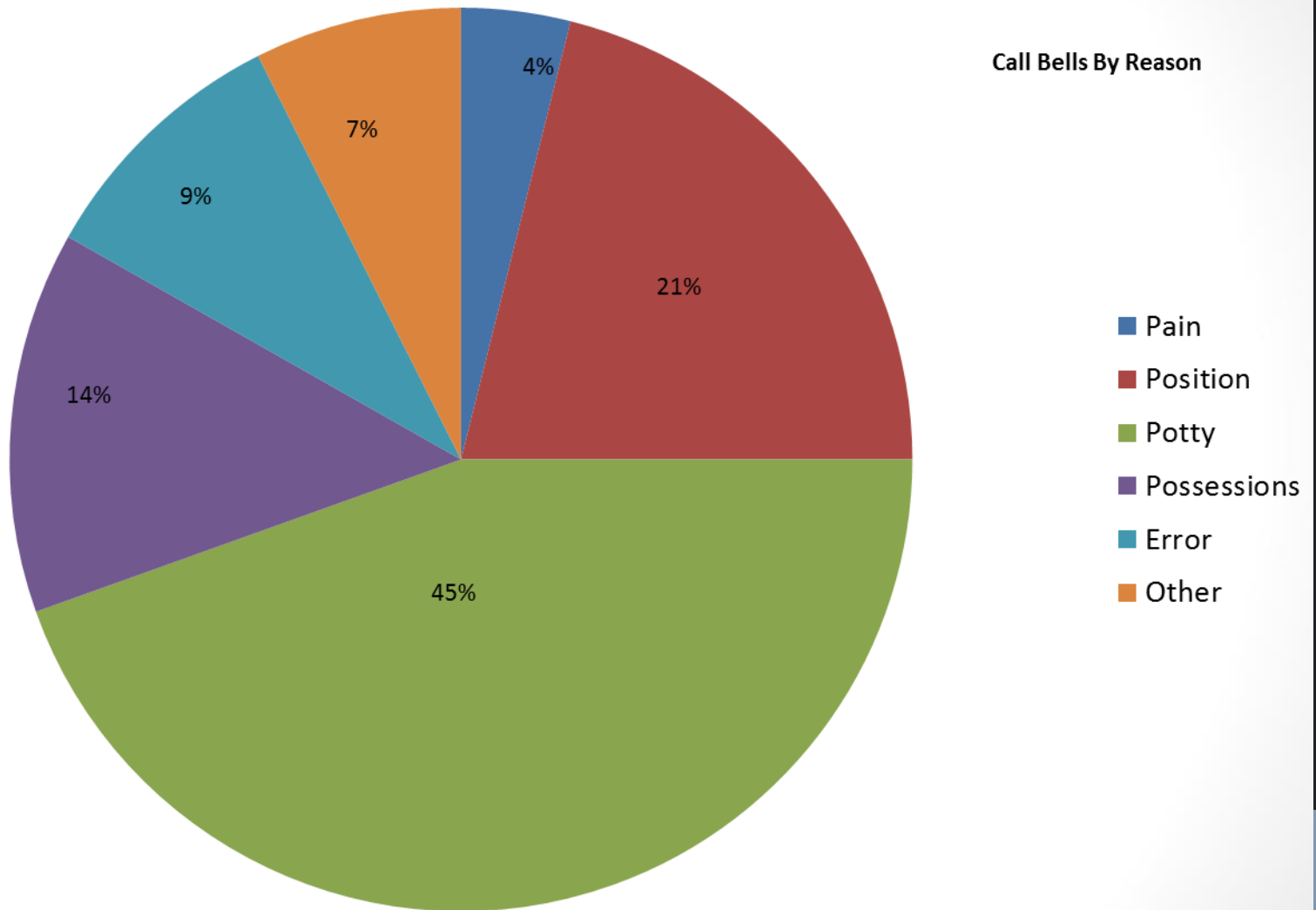
# Determining Current State

- Increased Activity Hours
- GPA
- Falls Prevention
- Kaizen Basics
- Incident Reporting Structure
- Daily Huddles

# Five Priorities

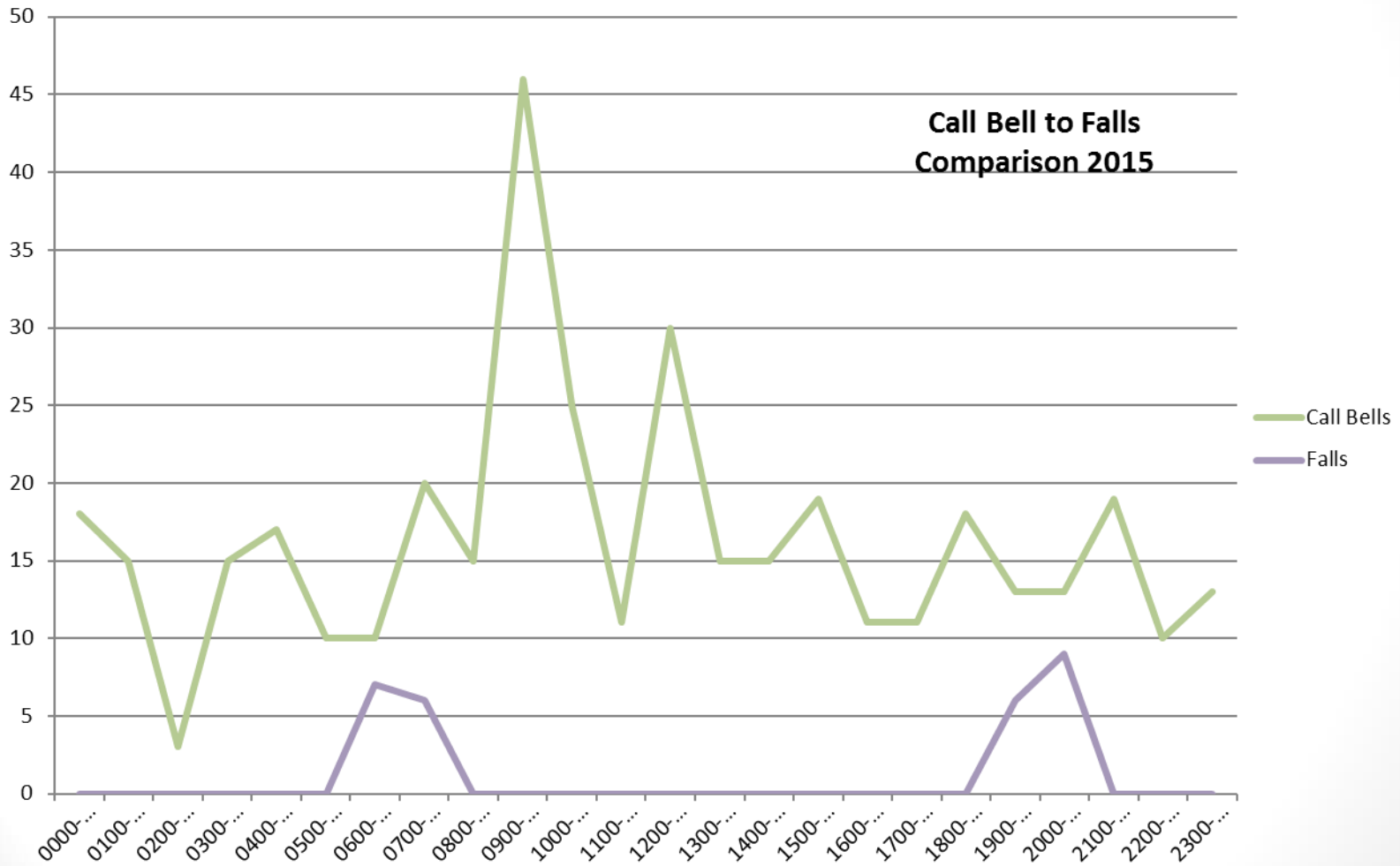
- Documentation
- Tools to assist staff in engaging in quality interactions
- Enhance resident interactions by use of multi-disciplinary huddles
- Defining and measuring quality of care from the perspective of the resident
- Determining a base line of care and a demonstration of improvement in SCHR

# Measurements

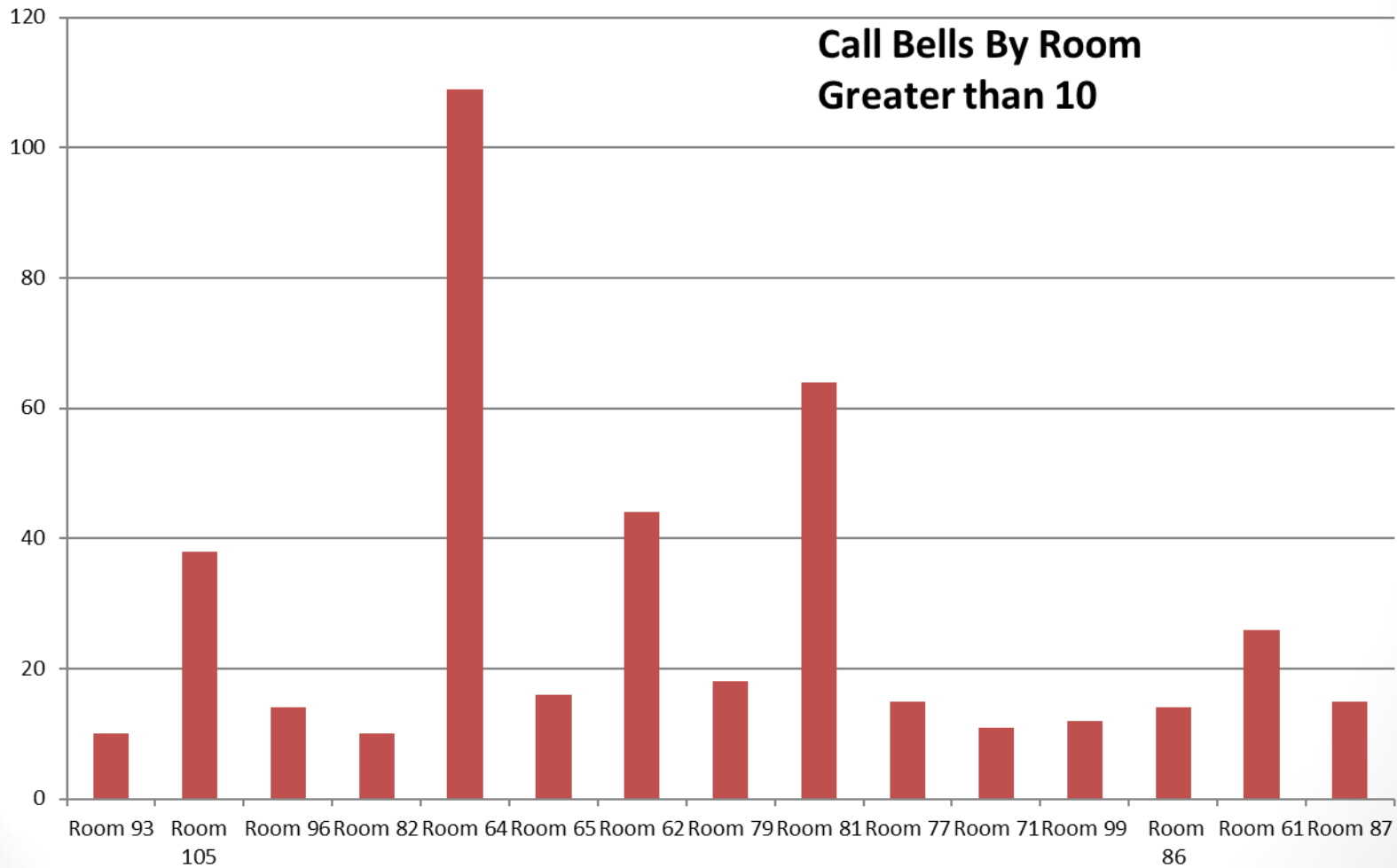




# Measurements



# Measurements



# Hourly Rounding?

- In the 3 hours we observed:
  - One resident had 10 interactions and the other 8
  - Staff from nursing, dietary, activities, laundry, housekeeping and management were involved in the interactions
  - Interactions were purposeful and resident focused
  - At no point was there 60 minutes or longer between interactions

# Next Steps

- Capturing documentation of resident response to interaction in the recreation department
- Utilizing measurement tools for work around workload distribution, resident care plans and team development
- Expand measurements – length of time from when call bell initiated until answered
- Care plan development and utilization including measures and MDS
- Measuring improvement

# Special Care Home Guidelines

- Program Guidelines for Special-care Homes are provincial guidelines that all special-care homes must follow
- Regions/Homes are required to implement policy and process to operationalize these guidelines
- Came under scrutiny of the Ombudsman Report
- Regional and facility based review of policies and processes to ensure we are meeting each component of the guidelines

# SouthSask Dementia Unit

- Regina Qu'Appelle Health Region is the lead
- Assessment unit
- Resource Team

# SCHR Established Practices

- Resident councils
- Resident & Family surveys
- CEO LTC tours
- Family & Resident Involvement on CQI Teams
- Accreditation

Questions?