Document 2: Long-Term Care Consolidated Workplan

Source: • CP -Compliance Plans • EF- Engagement Feedback • IR - Independent Review • AG - Auditor General Progress:

• C - Completed • IP - In Progress • NS - Not started

1. Staffing		
Training	Source	Progress
In-person training:	CP / EF	С
2018 training plan includes additional face-to-face training and testing		
2017 Prevention of Abuse Training:	CP / EF	С
 Annual mandatory training reviewed/updated to include scenario-based case studies 		
 100% of staff received in-person prevention of abuse training and were tested to verify comprehension 		
Abuse awareness:	СР	С
 2018 Annual Abuse Awareness week is scheduled in each Home 		
Visual aids:	CP / AG	С
 Visual reminder posters and quick reference cards with the slogan "See something? Hear something? Say something." developed and disseminated 		
Supervision training:	CP/EF	С
Registered staff received training on supervisory roles and responsibilities		
 Personal support workers (PSW) received training reinforcing expectations 		
Registered staff received training on Critical Conversations		
Review orientation program:	CP / EF	IP
Match new staff with PSW champions for orientation		
Retrain existing staff as required		
Conduct testing following orientation		
2018 Prevention of abuse training:	EF / AG	IP
Expand orientation and training that outlines information that must be		
included when reporting incidents to supervisors and managers		
Dementia training:	EF/IR	IP
 Certify staff as Gentle Persuasive Approach Trainers to support staff training and family education 		
Develop/deliver training on Montessori techniques		
Peer-to-Peer Training:	IR	IP
Review opportunities to introduce peer-to-peer education		
On-call manager training:	AG	NS
Develop/deliver on-call Manager training re: reporting incidents of abuse		
Effective communication:	EF/IR	NS
 Develop training for staff on effective communication and relationship building with residents, families and colleagues 		
PSW Certificate Course:	IR	NS
 Explore partnership opportunities to establish a Personal Support Worker certificate course 		

1. Staffing		
Recruitment & Staffing		
 HR screening process: Develop/implement new hiring tools based on required behaviors, attitude, language and skills for direct care positions Incorporate written tests and requirements for direct care positions 	EF/IR	IP
 Staffing ratios: Review recommendations from the independent third party review: increasing PSWs and registered staff and the creation of new positions, including nurse practice manager, quality and risk manager, human resources manager, admissions coordinator and staff development resource Review management structure Conduct industry review of management job descriptions and identify opportunities for improvement Review recommendation to convert short shifts to full shifts Develop a strategic plan to implement actionable changes, with approval of Council as required 	CP/EF AG/IR	IP
 Dementia unit suitability: Look for opportunities to develop a specific designation for PSWs on dementia units Review opportunities for staff to voluntarily declare their interest in working on dementia units 	IR	NS
Staff rotation: • Complete an industry review to determine best practices relating to PSW unit assignments	IR	NS
Temporary transfers: Review recommendation to stop temporary transfers between homes, including PSWs and management	IR	NS
Employee Recognition and Healthy Workplace		
 Service area strategy: Enhance employee recognition, focusing on how staff want to be recognized and mechanisms for residents and families to recognize staff Create a work plan to promote a safe and healthy work environment Engage Organizational Development to conduct an environmental scan and implement strategies Introduce a peer support network 	EF/IR	IP

2. Quality Improvement		
Practice and Procedure Review	Source	Progress
Care planning:	CP	O
Best practices were combined to create a cohesive P&P on care planning		
Supervision:	CP	С
 Developed P&P for supervision of PSWs, including clear roles, responsibilities and accountabilities 		
Critical incidents and abuse:	AG	IP
 Review/revise P&P 750.56-Critical Incident System & 750.65-Abuse and Neglect for consistency, ease of reference, and adherence to the Long Term Care Homes Act and Regulation 		
Medication:	AG	IP
 Review the medication P&Ps and work with the pharmacy provider to identify gaps and ensure current P&Ps are in accordance with Regulations Perform a full review of the medication log and audit requirements of the P&P on Government Pharmacy for non-prescription medications Review P&P related to Medication Disposal to ensure that correct procedures are in place for the disposal of non-controlled and over the counter medication 		
Sector Best Practice Review		
Cultural diversity:	СР	С
Researched/summarized/disseminated best practices to support residents with dementia from various cultural backgrounds		
De-escalation of behaviours:	AG	IP
Consult with outreach team from the Royal Ottawa Hospital to identify best practices in de-escalation techniques for inappropriate sexual behaviours Royal practices and implement improvements.		
Review procedures/best practices and implement improvements Resist of medications:	AG	NS
 Receipt of medications: Review best practices in the Long-Term Care sector related to verifying receipt of medication at point of delivery Develop/implement an action plan for improvements 	AG	INS
Medication administration:	AG	NS
Explore best practices in the area of safeguarding medication and minimizing interruptions to nurses while they are administering medications		
Second identifier:	AG	NS
Consult with our partners for sector best practices and implement an alternative form of identification for residents who are non-verbal		
Projects / Pilots		
Housekeeping:	EF	С
Review housekeeping processes to identify potential opportunities for improvements to our services within the current service delivery model		
Complaint process:	EF	IP
Complete a review of the complaint process and communicate identified improvements to residents, families, volunteers and staff		

2. Quality Improvement		
Meals:	EF	IP
Review current processes and identify potential improvements		
Access to supplies:	EF	IP
 Review inventory practices to ensure supplies are organized and available 		
at all times		
Process Updates		
Medication information:	EF	С
 Develop a process with pharmacy provider for residents and family 		
members to obtain information on medication		
Medication deliveries:	AG	IP
 Update medication delivery procedures to ensure that medication is 		
secured during transit in the Home		
Incident intake checklist:	AG	IP
Develop a reference document with standardized intake questions to		
ensure on-call managers obtain consistent and complete information		
Process refreshers:	AG	NS
Send a communication to registered staff outlining:		
 requirements of the City's practice and procedure on the destruction 		
and disposal of medication		
 proper process for record keeping and form completion related to the 		
emergency drug supply		
Medication destruction bins:	AG	NS
• In partnership with the third party contractor, develop and implement a sign-		
off process for medication destruction bins at time of pick-up		
 Develop a procedure for designated staff to verify the bins used for storing 		
of non-controlled drugs marked for "destruction and disposal" are sealed		
and properly disposed		
Governance / Oversight		_
Leadership rounds:	CP	С
 An enhanced Leadership Rounds schedule and checklist for managers has 		
been developed and implemented for additional visibility oversight and		
access for staff to receive management support on all shifts		
Audit tracking:	AG	IP
 Develop a template for managers to track the results of audits for trend 		
analysis, corrective action and to inform decision-making		
Monitoring compliance:	EF / AG	IP
During rounds, Managers will verify nursing stations/medication carts are		
locked when unattended and the shift-to-shift report template is being used		
Board of Directors:	IR	NS
Review recommendation for a Board of Directors for Long-Term Care		
Ministry Funding:	IR	NS
 Look at opportunities to negotiate with MOHLTC for additional high-wage 		
funding		

3. Infrastructure		
Information Technology	Source	Progress
Technology updates:	EF	IP
Upgrade resident care information system to improve accuracy, timeliness,		
and quality of care plans		
Resident safety:	EF	IP
Review feasibility of installing additional cameras in key areas to improve		
resident safety		
Medication rooms:	AG	NS
Complete a risk/cost-benefit analysis related to installations of cameras in		
the medication rooms/government pharmacies to reduce risk of diversion		
Medication administration record:	AG	NS
Implement the 2nd phase of the automated Resident Care Information		
System (Electronic Medication Administration Record) for verification of		
authorized staff administering medication and reduce the instances of		
incomplete records, may also be a secondary identifier for residents		
10 year plan:	IR	NS
Work with IT to leverage technology opportunities to improve resident care		
and services over the next 10 years		
Capital Investment		
Capital plan:	EF/IR	IP
Refresh the 10-year Capital Plan to identify highest priority items based on		
current needs and available resources		
Dementia units:	IR	NS
Review design of dementia units and implement current best practices		
wherever possible		
Building design:	IR	NS
Consider building design for new projects or upgrades to ensure that the		
design addresses the current needs of residents		

4. Communication		
	Source	Progress
Communication plan:	EF/IR	С
 Create an annual communication plan that identifies effective methods of communication with all stakeholders 		
Communication topics:	EF/IR	IP
 Provide newsletters and other communications to families on our services and processes, based on the stakeholder engagement feedback 		
Website update:	EF/IR	IP
 Update Long-Term Care pages on ottawa.ca to provide additional information that stakeholders have requested 		
Feedback opportunities:	EF	IP
 Provide a feedback mechanism for residents and families to identify other communication needs and opportunities for stakeholder feedback 		
Shift-to-shift report:	EF/IR	IP
Develop/implement standardized template for the verbal shift-to-shift report		
Family education:	EF/IR	NS
 Organize educational opportunities for families (i.e. dementia awareness) 		
Staff concerns:	AG	NS
 Communicate the existing corporate and Long-Term Care mechanisms for reporting/escalating staff issues and ensure communication is timely 		

5. Resident Care & Service Delivery		
Care Planning	Source	Progress
Kardex:	CP	С
A Kardex tool was developed with residents and families and posted for		
each resident as a quick reference for PSWs on the care plan		
Family involvement:	CP	С
Families provide input in care planning to develop an understanding of		
residents' cultural needs such as language, religion, food preferences		
Picture boards:	CP	С
Picture boards are created for residents with dementia to communicate their		
care needs, staff work with families to identify key words/phrases in the		
resident's language of choice		
Bathing schedule:	EF	IP
Review bathing schedule to assess opportunities to provide gender choice		
to residents and implement whenever possible		
Client Service		
Language capacity:	CP	С
Volunteers and staff have been surveyed to voluntarily indicate their		
language skills and determine their ability and willingness to support		
residents who speak languages other than English or French		
Consistency of staff:	EF	IP
Develop/implement a process for staffing coordinators/charge nurses to		
review rosters for opportunities to assign staffing resources for consistency		
PSW pilot:	EF	IP
Implement a pilot project for 6 months with temporary full-time floater PSWs		
scheduled to support consistency of staff when regular staff are absent	EE / ID	I.D.
Volunteer recruitment:	EF/IR	IP
Identify opportunities to improve volunteer recruitment with a focus on		
supporting meals, shift change and innovative resident programs		
Resident Mix	ID	ID
Secure units:	IR	IP
Review the number of secure units and staffing levels to ensure residents are sefe and receive the required ears.		
are safe and receive the required care	IR	NS
Program descriptions:	IIX	INO
Develop unit-specific program descriptions outlining the care and services provided in consultation with staff residents, families and volunteers.		
provided in consultation with staff, residents, families and volunteers	l	