

2024 Bruce County Business Plan

Department: Long Term Care

Strategic Priorities:

- Goal 1. Build a strong and inclusive community.
- Goal 2. Enhance and grow partnerships.
- Goal 3. Strengthen County’s use of technology and innovative initiatives.
- Goal 4. Ensure a positive, inclusive, and accountable work culture.
- Goal 5. Be an employer of choice.

2024 Bruce County Business Plan - Key Performance Indicators:

Indicator	Home	2018 Actual	2019 Actual	2020 Actual	2021 Actual	2022 Actual	2023 Actual (Q2)	2024 Budget /Target	2024 Q1	2024 Q2	2024 Q3	2024 Q4
How many municipal bed days are available?	BLH	52,560	52,560	52,560	52,560	52,560	52,560	52,560	52,560	52,560		
	GWH	36,500	36,500	36,500	36,500	36,500	36,500	36,500	36,500	36,500		
Occupancy rates based on 144 beds	BLH	93.60%	90.15%	99%	96.76%	98.33%	98.70%	99.00 %	99.01%	99.13%		
Occupancy rates based on 100 beds	GWH	99.13%	98.86%	96.6%	99.00%	97.09%	98.40%		99.05%	98.97%		

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Indicator	Home	2018 Actual	2019 Actual	2020 Actual	2021 Actual	2022 Actual	2023 Actual (Q2)	2024 Budget /Target	2024 Q1	2024 Q2	2024 Q3	2024 Q4
99.00%												
Average total cost of providing one long-term care bed per day.	\$220.22	\$225.95	\$271.62	\$318.09	\$380.07	\$394.48	\$401.29	\$ 418.52	\$402.00	\$409.65		
Average levy contribution per one long term care bed per day.	\$29.03	\$30.15	\$73.60	\$77.15	\$99.33	\$115.30	\$102.03	\$132.82	\$106.68	\$112.50		

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Publicly Reported Indicators as published by CIHI and HQO for LTC (Long Term Care) Homes. MOHLTC typically publishes its quarterly performance indicators twelve weeks after the end of each quarter

Indicator	Home	2018 Actual	2019 Actual	2020 Actual	2021 Actual	2022 Actual	2023 Actual	2024 Q1	2024 Q2	Provincial Average/ Home Target-2024
Residents who fell	BLH	15.3%	19.0%	18.3%	12.0%	26.2%	17.10%	19.20%	24.8%	15.3%
	GWH	18.9%	19.1%	20.1%	10.7%	15.7%	20.0%	19.10%	16	
Residents with worsened pressure ulcer	BLH	6.9%	5.1%	2.4%	6%	1.7%	1.60%	2.40%	3.1%	3.4%
	GWH	5.2%	3.3%	3.2%	11.9%	1.2%	4.30%	3.20%	3.3%	
Residents who were physically restrained	BLH	11.1%	6.4%	7.0%	4.1%	0.8%	0%	0%	1%	2.5%
	GWH	2.0%	8.6%	7.8%	8.3%	11.2%	5.30%	5.30%	5.3%	
Residents not living with psychosis given antipsychotic medication	BLH	17.1%	19.6%	29.1%	29.3%	28.6%	27.10%	24.40%	27.3%	21.1%
	GWH	19.0%	12.5%	11.5%	14.9%	19.8%	16.90%	17.30%	16.35%	

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Residents experiencing pain	BLH	16.5%	12.5%	11.5%	0.0 %	0.8%	1.60%	1.50%	0%	9.1%
	GWH	3.5%	2.9%	0.8%	17.9%	10.1%	4.20%	8.50%	7.4%	
Residents with worsened symptoms of depression	BLH	5.8%	16.6%	18.8%	31.1%	27.5%	19.20%	27.40%	36.9%	20.8%
	GWH	28.9%	26.4%	34.7%	20.5%	24.4%	16.10%	30.90%	38%	

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2024 Major Initiatives	Operational	Capital	Combined Total	Quarterly Update
	Budget Cost (year)	Budget Cost (year)	Budget Cost (year)	
1.Culture Transformation	\$24,480 Brucelea Haven \$13,272 Gateway Haven		\$24,480 Brucelea Haven \$13,272 Gateway Haven	<p>Leadership Progression: Change Management workshop was held and the leadership team co designed a “Change Management Toolkit “to support future change with best practices</p> <p>Staff Engagement Initiatives: The staff engagement group continues to be active in both homes and is currently charter of respect for team members, kindness campaign and guide to how staff live the mission.</p>
2.Scheduling	Existing operational budget and provincial funding.			The Long-Term Care homes have completed the initial consultation phrase of the scheduling

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				<p>project which included extensive consultation with staff and union members.</p> <p>The next phase is the development of the master schedules and implementation planning which will occur Q 3/Q 4.</p> <p>Concurrently, a review of the current scheduling processes occurred using process mapping and lead methodologies. Workflows have been updated to remove bottlenecks redundancies, updated to improve process and communication for users.</p>
<p>3.Operational Efficiency Enhancement</p>	<p>Existing operational budget and provincial funding.</p>			<p>SharePoint implementation concluded in Q 1.</p> <p>One Time</p>

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				<p>Medication Safety Funding from Provincial Government Provided for the purchase of Q new Medication Safety Ebox occurred. The new system will replace the current supply box to provide more control access which will enhance accuracy, accountability, and timely access to medications.</p>
4. Update Servery at Gateway Haven		\$82,000	\$82,000	Both Servery's have been full completed.

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2024 Major Initiatives (Operational & Owner)	Project Description	Estimated Budget Cost (year)	Outcome	Program Budget Pressure Category
<p>1. Culture Transformation</p> <p>Owners: Director of Long-Term Care and Senior Services, Administrator, LTC Department Managers & Staff Engagement Group</p>	<p>A cohesive and collaborative culture that achieved higher level of employee satisfaction and demonstrates “Resident’s First... Every day... Every way”</p> <p>The initiative includes three components as follows.</p> <p>Leadership Progression: Quarterly workshops will focus on enhancing leadership skills, covering key aspects such as communication, accountability, and change management.</p> <p>Staff Engagement Initiatives: Leverage current staff engagement group that collaborates across various locations. This group will work on targeted initiatives aimed at enhancing employee engagement and well-being.</p> <p>Front Line Training: Provide comprehensive training for all staff members, emphasizing effective communication, teamwork, and change management.</p>	<p>\$24,480 Brucelea Haven</p> <p>\$16,320 Gateway Haven</p>	<p>Leadership Progression Q1 through Q4</p> <p>Staff Engagement Initiatives Q1 through Q4</p> <p>Front Line Training Q2 and Q3</p>	<p>Maintain Services</p>
<p>2. Scheduling</p> <p>Owners: Scheduling Supervisor</p>	<p>Design a scheduling service department which has standardized business process, schedules that optimization workforce and support recruitment/retention</p> <p>The initiative includes three components as follows.</p>			<p>Service Initiative</p>

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	<p>Process Mapping: Analyze the current scheduling processes from end to end. Map out the steps involved in creating, modifying, and communicating schedules. Identify bottlenecks, redundancies, and areas for improvement.</p> <p>Evaluation of Tools and Technology: Assess current scheduling tools and software, gauging effectiveness, user-friendliness, and integration capabilities.</p> <p>Data-Driven Insights: Analyze historical scheduling data to uncover Patterns and trends. Utilize insights to predict demand, optimize resource allocation, and prevent staffing imbalances.</p>		<p>Process Map Q 1 and Q 2</p> <p>Evaluation of Tools and Technology Q 2</p> <p>Data-Driven Insights Q 3</p>	
<p>3. Operational Efficiency Enhancement</p> <p>Owners: Clinical Support Manager, Director of Nursing Department Manager</p>	<p>Operational efficiency enhancements will result in streamlined processes, reduced costs, and improved overall productivity across the department.</p> <p>Process Review: Streamline and optimize processes for medical documentation workflow.</p> <p>Centralized Files: Implement SharePoint for the department to allow for easy access to essential documents, enhanced collaboration and minimize the risk of data duplication.</p> <p>Integration of New Health Technologies: Integrate innovative health technologies, such as a Skin and</p>		<p>Process Review Q1 through Q4</p> <p>Centralized Files Q 1</p> <p>Integration of New Health Technologies Q1 through Q4</p>	<p>Service Initiative</p>

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	Wound Care Application, Companion, and Medication Safety Ebox to improve resident experience and provide personalized healthcare solutions.			
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2024 Major Initiatives (Capital)	Project Description	Estimated Budget Cost (year)	Outcome	Program Budget Pressure Category
4. Update Servery at Gateway Haven Owners: Administrator & Environmental Services Manager	Updated kitchen server that meets all regulatory requirement for food safety. This project includes the replacement of counters, steam table, and flooring.	\$ 82,000	Q 3 and Q 4	Maintain Services

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Key Performance Indicators Index:

Key Performance Indicators	Description
How many municipal bed days are available?	Compiled by multiplying the number of days in year by 244 the number of LTC beds in Bruce County
Percentage of Occupancy rates based on maximum 244 residents	Compiled by dividing the number of days a year by the number of the 244 County LTC beds occupied
How much does it cost on average to provide one long-term care bed in Bruce County per day - (County res/day Contribution)	The cost of One LTC bed is determined by taking the total annual operational expenditure excluding capital divided by 365 days divided by 244 (the number residing LTC residents in Bruce County) Annual County Contribution assigned to GWH and BLH is divided by 365 days and divided by 244 LTC County residents
How satisfied are residents with municipal Long Term Care Services at Brucelea Haven	Derived and compiled from annual Resident Satisfaction survey including evaluation of all LTC services to residents; The survey is based on MOHLTC quality protocols and is an integral part of the MOHLTC annual on-site Resident Care Inspection
Residents who fell	The number of residents who fell divided by the total number of residents X 100 %
Residents with worsened pressure ulcer	The number of residents with pressure ulcers divided by the number of residents whose pressure ulcer has worsened X 100%
Residents who were physically restrained	Number of residents who in connection with their plan of care require physical restraint daily. This would be prescribed by the physician and in agreement with the resident's POA
Residents not living with psychosis given antipsychotic medication	Based on RAI – Resident Assessment Instrument facility collected data; reported to and compiled by CIHI Canadian Institute for Health Information- using provincial averages and benchmarks for LTC
Residents experiencing pain	Based on RAI – Resident Assessment Instrument facility collected data; reported to and compiled by CIHI Canadian Institute for Health Information- using provincial averages and benchmarks for LTC
Resident experiencing worsened symptoms of depression	Based on RAI – Resident Assessment Instrument facility collected data; reported to and compiled by CIHI Canadian Institute for Health Information- using provincial averages and benchmarks for LTC

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