#### **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	BLH	52,560	52,560	52,560	52,560	52,560	52,560	52,560	52,560	52,560	52,560	
available?	GWH	36,500	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%	99.16%	
Occupancy rates based on 100 beds	GWH	99.13%	98.86%	96.6%	99.00%	97.09%	98.40%		99.05%	98.97%	98.97%	

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	\$408.76	
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	\$95.97	

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	2024 Q3	Provincial Average/ Home Target- 2024
Residents	BLH	15.3%	19.0%	18.3%	12.%	26.2%	17.10%	19.20%	24.8%	29.63%	15.3%
who fell	GWH	18.9%	19.1%	20.1%	10.7%	15.7 %	20.0 %	19.10%	16%	14%	
Residents with worsened	BLH	6.9%	5.1%	2.4%	6 %	1.7%	1.60%	2.40%	3.1%	2.5%	3.4%
pressure ulcer	GWH	5.2%	3.3%	3.2%	11.9%	1.2%	4.30%	3.20%	3.3%	0%	
Residents who were	BLH	11.1%	6.4%	7.0%	4.1%	0.8%	0%	0%	1%	1.23%	0.5%
physically restrained	GWH	2.0%	8.6%	7.8%	8.3%	11.2 %	5.30 %	5.30 %	5.3%	4%	2.5%
Residents not living with	BLH	17.1%	19.6%	29.1%	29.3%	28.6%	27.10%	24.40%	27.3%	25%	
psychosis given antipsychotic medication	GWH	19.0%	12.5%	11.5%	14.9%	19.8%	16.90%	17.30%	16.35%	21%	21.1%

Residents	BLH	16.5%	12.5%	11.5%	0.0 %	0.8%	1.60%	1.50%	0%	1.23%	9.1%
<sup>r</sup> experiencing pain	GWH	3.5%	2.9%	0.8%	17.9%	10.1%	4.20%	8.50%	7.4%	8%	9.176
Residents with	BLH	5.8%	16.6%	18.8%	31.1%	27.5%	19.20%	27.40%	36.9%	34.18%	20.8%
worsened symptoms of depression	GWH	28.9%	26.4%	34.7%	20.5%	24.4%	16.10%	30.90%	38%	24%	20.0 %

2024 Major Initiatives	Operational	Capital	<b>Combined Total</b>	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	Quarterly leadership workshops have been conducted to enhance key skills in communication, accountability, and change management. Additionally, the staff engagement group, continues to be actively working on initiatives to improve employee engagement and well-being.
2.Scheduling	Existing operational budget and provincial funding.			The scheduling service department has been designed with standardized processes to optimize workforce scheduling. Key activities include analyzing and updating scheduling processes, developing new master schedules, and preparing homes to communicate upcoming schedule

		changes set to begin in 2025.
3.Operational Efficiency Enhancement	Existing operational budget and provincial funding.	Operational efficiency enhancements have been completed, resulting in streamlined processes, cost reduction, and improved productivity. Key activities include:Optimization of the medical documentation 

			and Medication Safety Ebox, to enhance resident care and personalization.
4. Update Servery at Gateway Haven	\$82,000	\$82,000	Both servery's have been updated in Q 3. Project is completed.

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

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

Wound Care Application, Companion, and Medication Safety Ebox to improve resident experience and provide personalized healthcare solutions.		

2024 Major Initiatives (Capital)	Project Description	Estimated Budget Cost (year)	Outcome	Program Budget Pressure Category
4. Update Servery at Gateway Haven	Updated kitchen server that meets all regulatory requirement for food safety.	\$ 82,000	Q 3 and Q 4	Maintain Services
<b>Owners:</b> Administrator & Environmental Services Manager	This project includes the replacement of counters, steam table, and flooring.			

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