



Annual Report

2007 / 2008

Selkirk, Manitoba



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2007 / 2008
(Tudor House P.C.H.)
Selkirk, Manitoba**

Program / Service Description:

Tudor House Personal Care Home is a Licensed and Accredited 76 bed Private Long Term Care Facility that is located beside Woodland Courts Independent & Assisted Living Suites for Seniors (53 Suites) on spacious landscaped grounds in Selkirk nearby the local Selkirk & District General Hospital. The facility is restricted to *Smoke Free Living (NO SMOKING)*. Our Mission Statement is **“Resident Centred Care, provided with Quality, Dignity, Compassion & Partnership.”**

Tudor House maintains very high standards, designed to ensure the resident benefits from individualized care provided in a courteous and friendly manner in a home-like atmosphere. The care we give builds on the resident's strengths and constantly seeks to improve their quality of life, physically, mentally, emotionally and spiritually. The facility has two separate care areas all on ground level. (*46 private rooms, 13 semi-private, 1- 4 bed Dorm*) Maple Hall has the Alzheimer /Dementia Special Care Needs Rooms and Poplar & Oak Halls have with Personal & Extended Care Rooms to better meet clients by grouping residents with like-needs together. In addition to care to Elderly & Dementia clients, we are also providing long term care services to mentally and physically handicapped adults, seniors with stable psychiatric needs, respiratory clients and hospice type care for the dying.

The following Service Components are provided on site:

- Medical Advisors & Services (*weekly visits by Dr.Demsas/Dr. Lindenschmidt*)
- Consultant Psychiatrist Services (*monthly visit by Dr.Kremer*)
- Professional & Non-professional Nursing Services (*RN,RPN,LPN,HCA*)
- Recreation & Volunteer Services (*Certified Recreation Facilitators*)
- Social Services (*Part Time*)
- Pharmacy Services (*Shoppers Drug Mart*)
- Podiatrist Services (*monthly Dr. Yacob*)
- Hairstylist Services (*Provincially Licensed*)
- In-service & Education Services (*.5 Part Time*)
- Pastoral Care (*Selkirk & District Ministerial Assoc. & Catholic Pastors*)
- Consultant Dietician Services (RD)
- Dietary Services (*Certified Food Service Supervisor & Certified Food Handlers*)
- Housekeeping Services
- Laundry Services
- Maintenance Services (*Class 4 Power Engineer & K Licenses*)
- Administration, Accounting and Business Services (*Comptroller CA, & KPMG Auditor*)

The following Service Components are provided by the IRHA:

- Occupational Therapy Services (*8 hrs per month*)
- Physiotherapy Services (*on referral basis*)
- Lab & X-ray Services
- Ambulance Services

Utilization:

The following Statistics have been gathered regarding Service Utilization for the past year:

	2006-07	2007-08
Occupancy Rate	99.30	99.18
# of Regular Admissions	9	11
# of Interim Admissions	21	28
# of Discharges to Community	3	2
# of Transfers to other PCH	9	12
# of Deaths	18	25
Male Residents	25	23
Female Residents	51	53
Aged (over 65)	73	72
Average Age	89.51	81.89
Average Length of Stay		3.03 yrs
Physically Challenged and/or Disabled	67	68
Developmentally Delayed	2	1
Psychiatrically Disabled	7	7
# of Hospital Admissions	19	32
# of ER Visits	30	24
Levels of Care		
Level 2	3	2
Level 3	41	38
Level 4	32 (7 CC)	36 (3 CC)
Total Residents	76	76

No longer require PCH care
Return to home community

as of March 31
as of March 31
as of March 31
as of March 31
as of March 31

(Chronic Care Indicators)

WRHA MIS Nursing Staffing Summary (as per SPA)

Staffing	2006-07	Paid Hrs per Resident Day	2007-08	Paid Hrs per Resident Day
RN/RPN hrs Total	12,697.26 hrs	34.79 hrs	12,729.28 hrs	34.87 hrs
LPN hrs Total	15,095.00 hrs	41.36 hrs	16,968.28 hrs	46.49 hrs
HCA hrs Total	61,678.36 hrs	168.98 hrs	64,274.22 hrs	176.09 hrs

Nursing Staffing Patterns (as per Schedule):

Staffing patterns were stable based upon levels of care as reported annually to WRHA & IRHA. Obtaining Nursing staff (RN,RPN,LPN,HCA) remains challenging but we continue to strive to make Tudor House an “employer of choice” to attract and retain staff.

	2006-07	Staffing Ratio	2007-08	Staffing Ratio	2008-09	Staffing Ratio
Days	1 SNM,1RN, 3 LPN, 8 HCA	1: 5.85	1 SNM,1RN, 3 LPN, 8 HCA	1: 5.85	1 SNM,1RN, 3 LPN, 9 HCA	1: 5.43
Evenings	1 RN,3 LPN, 6.5 HCA	1: 8	1 RN,3 LPN, 6.5 HCA	1: 8	1 RN,2 LPN, 7 HCA	1: 7.6
Nights	1 RN, 4 HCA	1:15.2	1 RN, 4 HCA	1:15.2	1 RN, 4 HCA	1:15.2

*Please Note that the 2008 Manitoba Health Nursing Staffing Increase has been put on hold (Status Quo) and we are awaiting a decision on the final funding adjustments from Manitoba Health/ WRHA and LTCAM.

Indicators:

Tudor House has an active “Continuous Quality Improvement Program” with the following Performance Indicators revised and utilized for 2007-08 with benchmarks, analysis and actions in the full annual report.

Highlights & New Indicators

Performance Indicator	2006-07	2007-08
% of Falls per 1000 Resident Days	Satisfactory 3.5%	Satisfactory 3.7%
Actual # of Falls per month – Days, Eves, Nites	Days 3.8, Eves 2.4, Nights 2.4	9.5 per month average
% of Falls per Thousand Resident Days – Major Injuries	Satisfactory 0.14%	
% of Residents with Skin Breakdown—Pressure Ulcers	Alert 6.9%	
% of Residents with New Pressure Ulcers (Internal/External acquired) per 1000 resident days		Satisfactory 0.84% average
# of Skin Breakdown - by Stages	Needs Improvement 0.5 Average for 12 months for Stage IV Skin Breakdowns	
% of Residents who are on Restraints	Needs Improvement 16.2%	Needs Improvement 16.0%
% of Residents who are restrained per 1000 resident days		Alert 9.4% average
Medications/ Substances Reports per 1000 resident Days		Satisfactory 1.25 average
# of Occurrence Reports	13 / month average	20.6 /month average
# of Critical Clinical Occurrences	0	0.08 average (1 actual)
# of Critical Occurrences	0	0
# of Near Misses		0.5 (6 actual)
# of Workplace Injuries per month		Alert 1.9 average
% of Residents & Family or Advocates Satisfied with Services		Satisfactory 91.3%
% of Comment/Concern Reports Satisfactorily Resolved		Satisfactory 96.7%
# of Fire Drills held per Month/Time of Day	Satisfactory Rating 3 q month, All shifts	Satisfactory Rating 3 q month, All shifts
% of Preventative Maintenance Inspections Completed	Satisfactory 100%	Satisfactory 100%
% of Residents with Infections per Month (actual)	Alert 5.1%	Alert 5.0%
% of Residents with Nosocomial Infections per 1000 Residents Days		Satisfactory 3.1% average
# of Types of Infections	Satisfactory - Average per month as follows: Respiratory 1, Eye 0, Ear 0, GI 0, Genital 0, Urinary 0.75, Skin 1.2, Other 0.25	Satisfactory - Average per month as follows: Respiratory 3, Eye 0.16, Ear 0, GI 0, Genital 0, Urinary 1.5, Skin 1.5, Other 0.08
% of New Staff Orientation per month		Satisfactory 100%

% of Residents Immunized for Influenza Vaccine	Satisfactory 92%	Alert 82%
% of Staff Immunized for Influenza Vaccine	Satisfactory 64%	Satisfactory 67%

<i>Union/Employer Relations</i>	<i>2006-07</i>	<i>2007-08</i>
<i># of MNU Grievances Local 117</i>	0	0
<i># of IUOE Grievances Local 987</i>	0	0

****Note: The “New” Performance Indicators that will be utilized for 2008-09 will also better reflect new “Accreditation Canada” Qmentum Standards and required organizational practices (ROPs) as well as examine new areas of interest.**

Annual Update:

Accreditation Canada 2007 Survey

Accreditation Canada (CCHSA) completed a survey of Tudor House in the fall 2007 and were granted “Accreditation” no conditions or report requirements were attached. We received 4 recommendations in total, none urgent or of a patient safety nature. All Required Organizational Practices were met. We will be addressing the areas indicated within the 2008-09 operating year with in the new Qmentum Program. (1 Environment, 2 H.R. and 1 I.M.)

Manitoba Health PCH Standards Visit 2007

Manitoba Health representatives completed a PCH Standards Visit using Tool # 2 on April 3rd 2007. Tudor did very well overall with meeting ten out of the twelve Standards. Follow-up work and reports were done on the two Standards that needed attention (#7 Integrated Care Plan, # 5 Complaints) and were successfully resolved during the past year.

Strategic & Operational Plans

Tudor House’s New Strategic and Operational Plan 2007 and Beyond was followed during 2007-08 fiscal year with all significant timelines met and revised deadlines for a few minor issues were set.

The Tudor House “Community Advisory Committee” will be scheduled to meet again in the fall of 2008 providing an opportunity for stakeholders, families and employees to be updated and discuss revisions to the Strategic and Operational planning as well as help generate new ideas and suggestions from our local community.

The continued improvements to the physical building, equipment and operational practices was maintained and expanded upon. Ongoing redecorating (*as per the Interior Decorator’s recommendations*) for the facility to make it more home-like and less institutional continued throughout 2007-08. 10 more new high-low LTC beds & special mattresses, a Sara 3000 Sit Stand Lift (*from Donations*) were purchased as well as continued Physical Plant improvements (Power safe), equipment replacement and numerous IT upgrades.

The major capital planning priority for 2008-10 is the new business plan proposal for redevelopment and renovation of Tudor House Personal Care Home to meet current Manitoba Health Design Guide Standards for Long Term Care Facilities and to become a “centre of excellence” for the elderly. This has be shared with the Board of the IRHA for comment, suggestions and collaboration in order to better meet the long term care Population Health needs of the region in the future.

Also for 2008-09 will be further FMEA Exercises and more work on processes to work towards better Patient Safety Practices. The two successfully implemented nationally recognized Nursing Best Practices (RNAO) last year will be expanded upon with the introduction of two more Nursing Best Practices.

Education, Training & In-servicing

Staff Safety Practices and education & training will continue to be a priority during the next fiscal year. "Life Support for Health Care Providers Training" (Professional and HCA) will continue to be taught to our staff. Also "Non-Violent Crisis Intervention Training" (CPI) of our staff will continue with our in-house instructor. Annual staff In-servicing on basic safety and required skill updating will still continue for all staff. We hope to introduce Ethic workshop and Hospice or end of life In-servicing for our staff and other new initiatives.

**** Our New Major Challenge & Initiative for 2008:**

"The Eden Alternative ®"

Mission: To improve the well-being of Elders and those who care for them by transforming the communities in which they live and work.

Vision: To eliminate loneliness, helplessness, and boredom.

We are very pleased to announce that effective May 23, 2008 Tudor House is officially beginning it's "Journey into the Eden Alternative" ®. We welcomed all staff to familiarize themselves with this exciting new process for the care of our Elders. This process to Edenize a Nursing home is intended to help banish the three plagues of the human spirit that afflict many of our elders, "loneliness, helplessness and boredom".

There are many positive changes that will come out of this process and we encourage and hope all of our staff and families support this endeavor to make a real home and Garden of Eden for our Elders. Four of our staff are officially trained as "Eden Alternative Associates" and we hope to train at least 4 more. We have shared our new direction with the Resident & Family Council and we have their support. We will continue to process to educate and inform all of our Elders, Staff and Families on the Eden Alternative. A new Brochure, books and Videos will be available soon to borrow and assist in staff training.

Some of the exciting new improvements, will be the creation of neighborhoods, relaxed breakfasts, reduction of strict routines for our Elders, encouraging and motivating staff for Random Acts of Kindness, Good Deeds and loving care of our Elders, increasing pets and natural plants, new Elder-centered activities, less medications, more choices for Elders, increase children visitation and interaction, discontinue uniforms for all staff (*between today and June 1st 2009 Uniforms are optional in all departments after June 1st 2009 they will no longer be permitted*), Staff Learning Circles, Increase Staff Empowerment, Staff Self-Scheduling and many more.

It Can Be Different!

Be a Part of the Solution!