



# Tudor House



## Annual Report

2008 / 2009

Selkirk, Manitoba





**Annual Report  
2008 / 2009  
(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, a limited number of 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 (*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/EMS Services

**Utilization Statistics:**

The following Statistics have been gathered regarding Service Utilization for the past year and as @ March 31st:

	2006-07	2007-08	2008-09
<b>Occupancy Rate</b>	99.30	99.18	99.56
<b># of Regular Admissions</b>	9	11	19
<b># of Interim Admissions</b>	21	28	15
<b># of Discharges to Community</b>	3	2	2
<b># of Transfers to other PCH</b>	9	12	11
<b># of Deaths</b>	18	25	22
<b>Male Residents</b>	25	23	19
<b>Female Residents</b>	51	53	56
<b>Aged (over 65)</b>	73	72	73
<b>Average Age</b>	89.51	81.89	84
<b>Average Length of Stay</b>		3.03 yrs	2.99 yrs
<b>Physically Challenged and/or Disabled</b>	67	68	73
<b>Developmentally Delayed</b>	2	1	2
<b>Psychiatrically Disabled</b>	7	7	11
<b>Continuous Oxygen (O2)</b>	4	4	4
<b># of Hospital Admissions</b>	19	32	13
<b># of ER Visits</b>	30	24	18
<b>Levels of Care</b>			
<b>Level 2</b>	3	2	3
<b>Level 3</b>	41	38	46
<b>Level 4</b>	32 (7 CC)	36 (3 CC)	26 (5 CC)
<b>Total Residents</b>	76	76	75

**WRHA MIS Nursing Staffing Summary (Paid Hours per Resident Day as per SPA)**

Staffing	2006-07 hrs	PH/RD	2007-08 hrs	PH/RD	2008-09 hrs	PH/RD
<b>RN/RPN hrs</b>	12,697.26	34.79	12,729.28	34.87	13,198.86	36.16
<b>LPN hrs</b>	15,095.00	41.36	16,968.28	46.49	14,716.86	40.32
<b>HCA hrs</b>	61,678.36	168.98	64,274.22	176.09	67,733.67	185.57

**Nursing Staffing Patterns (as per Schedule @ March 31<sup>st</sup>):**

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
<b>Days</b>	1 SNM,1RN, 3 LPN, 8 HCA	1: 5.85	1 SNM,1RN, 3 LPN, 8 HCA	1: 5.85	1 SNM,1.5RN, 2.5 LPN,10HCA	1: 5.07
<b>Evenings</b>	1 RN,3 LPN, 6.5 HCA	1: 8	1 RN,3 LPN, 6.5 HCA	1: 8	1 RN,2 LPN, 8 HCA	1: 6.91
<b>Nights</b>	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 full implementation has been delayed and extended to 2012 due to financial constraints as per WRHA.

### C.Q.I. Performance Indicators:

Tudor House has an active “Continuous Quality Improvement Program” with the following Performance Indicators revised and utilized for 2008-09 with benchmarks, analysis and actions in the full annual report.

#### Highlights & New Indicators

<b>Performance Indicator</b>	<b>2006-07</b>	<b>2007-08</b>	<b>2008-09</b>
% of Falls per 1000 Resident Days	<b>Satisfactory</b> 3.5%	<b>Satisfactory</b> 3.7%	<b>Satisfactory</b> 2.5%
Actual # of Falls per month – Days, Eves, Nites	Days 3.8, Eves 2.4, Nights 2.4	9.5 per month average	6.3 per month average
% of Residents with New Pressure Ulcers (Internal/External acquired) per 1000 resident days	N/A	<b>Satisfactory</b> 0.84% average	<b>Satisfactory</b> 0.80% average
% of Residents who are on Restraints	<b>Needs Improvement</b> 16.2%	<b>Needs Improvement</b> 16.0%	<b>Needs Improvement</b> 14.3%
% of Residents who are restrained per 1000 resident days	N/A	<b>Alert</b> 9.4% average	<b>Alert</b> 7.7% average
Medications/ Substances Reports per 1000 resident Days	N/A	<b>Satisfactory</b> 1.25 average	<b>Satisfactory</b> 0.5 average
# of Occurrence Reports	13 / month average	20.6 /month average	13.8/month average
# of Critical Clinical Occurrences	0	0.08 average (1 actual)	0
# of Critical Occurrences	0	0	0
# of Near Misses		0.5 (6 actual)	0.2 (2 actual)
# of Workplace Injuries per month	N/A	<b>Alert</b> 1.9 average	<b>Alert</b> 1.3 average
% of Residents & Family or Advocates Satisfied with Services	N/A	<b>Satisfactory</b> 91.3%	<b>Satisfactory</b> 95.8%
% of Comment/Concern Reports Satisfactorily Resolved	N/A	<b>Satisfactory</b> 96.7%	<b>Satisfactory</b> 100%
# of Fire Drills held per Month/Time of Day	<b>Satisfactory</b> Rating 3 q month, All shifts	<b>Satisfactory</b> Rating 3 q month, All shifts	<b>Satisfactory</b> Rating 3 q month, All shifts
% of Preventative Maintenance Inspections Completed	<b>Satisfactory</b> 100%	<b>Satisfactory</b> 100%	<b>Satisfactory</b> 100%
% of Work Orders Completed in 30 days	N/A	N/A	<b>Satisfactory</b> 95.4% month average
# of Outbreaks	Respiratory - 0 Enteric - 1	Respiratory - 1 Enteric - 0	Respiratory – 1 Enteric - 0
% of Residents with Infections per Month (actual)	<b>Alert</b> 5.1%	<b>Alert</b> 5.0%	<b>Satisfactory</b> 4.1%
% of Residents with Nosocomial Infections per 1000 Residents Days	N/A	<b>Satisfactory</b> 3.1% average	<b>Satisfactory</b> 2.2% average
# of MRSA Infections	1	0	3

# of C. difficile Infections	0	0	0
% of Residents Immunized for Influenza Vaccine	Satisfactory 92%	Alert 82%	Alert 85%
% of Staff Immunized for Influenza Vaccine	Satisfactory 64%	Satisfactory 67%	Satisfactory 65%
% of New Staff Orientation per month	N/A	Satisfactory 100%	Satisfactory 100%

Union/Employer Relations	2006-07	2007-08	2008-09
# of MNU Grievances Local 117	0	0	0
# of IUOE Grievances Local 987	0	0	0

**\*\*Note: The “New” Performance Indicators that will be utilized for 2008-10 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 2010 Survey**

Accreditation Canada (CCHSA) is scheduled to complete a survey of Tudor House in the fall 2010. We are well underway in planning and preparation for the new Qmentum survey planned for Tudor House and hopes to do well under the new guidelines and meet all the ROPs and Standards.

#### **Manitoba Health PCH Standards Visit 2009**

Tudor House is preparing for Manitoba Health & IRHA representatives to complete our 6<sup>th</sup> PCH Standards Visit on Sept. 17<sup>th</sup> 2009.

#### **Strategic & Operational Plans**

Tudor House’s New Strategic and Operational Plan 2008 and Beyond was followed during 2008-09 fiscal year with all significant timelines met and revised deadlines for a few minor issues were set.

**Community Outreach:** The Tudor House “Community Advisory Committee” met in November 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. Suggestions and input from the community was well received.

**Health Canada Beds & Mattresses Recommendations:** According to Health Canada recommendations “patient entrapment hazards for bedrails and mattresses” was identified as a serious safety concern. We were advised by IRHA that all of our beds and mattresses should be assessed to identify a priority replacement list. Following a thorough check and measurement of all our bed rails and mattresses we identified one mattress that was too small for the bed. This one is privately owned and family has been advised of our concern and they have been encouraged to remove same and we have ordered new mattresses to both replace the one (1) mattress that does not meet recommendations and for the new beds on order.

There were 26 older bed rails that were identified as being an entrapment risk. Twenty two of the twenty six bed rails have been removed and the remaining 4 with bedrails that do not meet the recommendations and that may present a risk have been padded to minimize the danger and monitored by staff regularly for safety. Ten new beds have been ordered and will be arriving in the near future. These four remaining beds and rails will be removed at that time.

**Capital Planning:** The major capital planning priority for 2008-10 remains as 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 is an ongoing project with the feasibility study completed by Stantec Architecture. Ongoing capital planning is underway.

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 2008-09. 10 more new high-low LTC beds & special mattresses, a second Sara 3000 Sit Stand Lift and third Invacare Lift (*from Donations*) were purchased as well as continued Physical Plant improvements (Power safe), equipment replacement and numerous IT upgrades. We are currently fundraising for Neurogym Equipment for Rehabilitation Programs for our Residents and expect to reach our fundraising goal this next year of \$15,000.00

**Analytical Reviews:** Also for 2009-10 will be further FMEA Exercises, Root Cause Analysis and more work on processes to work towards better Patient Safety Practices.

**Best 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.

**Green Environmental Initiatives:** Tudor House continues to recycle both glass, metal, tins, paper & cardboard significantly reducing its Waste Removal volumes. We have made considerable progress on Power saving lighting both on reducing incandescent and upgrading the fluorescent lighting. Power saving Parking electrical Car plug ins have all been installed and other initiatives are planned to reduce our carbon footprint and be more sustainable

#### **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 Care Challenge & Initiative for 2008 & Beyond:**

**The Eden Alternative Journey ®:**

**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.

Tudor House began officially effective May 23, 2008 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". It is a gentle care type of philosophy that focuses on the elder being cared for and supported in a home atmosphere rather than an institutional environment.

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 4 more were trained in early 2009. 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 are available to borrow and assist in staff training.

Some of the exciting new improvements, is the creation of neighborhoods (Maple Hall & Poplar Hall), 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. Staff uniforms policy is under review for a final determination of balancing respect, professionalism and Infection control issues. Dramatic new changes with union and management working together for a major HCA staffing reorganization resulting in Full and Part time staff dedicated to specific neighborhoods to ensure continuity of care and increase staff elder bonding and pride in work area and with very positive results. This is being examined for extending to other departments for neighborhood assignments.

**It Can Be Different!**

**Be a Part of the Solution!**

Respectfully Submitted by

John A. Martyniw RN RPN  
Administrator  
June 11 2009