HOMES FOR THE AGED DIVISION ACHIEVEMENT OF 2007 OBJECTIVES BENDALE ACRES

	Objective	Success	Indicators of Achievement
1.	MDS-RAI Documentation To achieve successful implementation of all functions within the established time frames.	Achieved	 236 Resident Care plans converted to RAPS 12/31/07. Projected full completion 01/30/08. 58% of RN/RPN positions trained in MDS coding. 77% of coders are RAPS trained. 100% audit of completed records. Gaps identified related to assessments and corrected. All disciplines trained and completing own assessments on MDS RAI.
2.	Expansion of Community Support Programs To determine and implement community needs driven adult day program services within existing resources.	Achieved	 Survey developed and administered to current members of the ADP. Identified interest in evening and weekend services. Survey for distribution to community services for distribution in January 2008. Hosted an open house for community service providers and families.
3.	LHINS Health Service Plan To identify opportunities in which Bendale can assist the Central East LHIN in achieving their integrated health service plan.	Achieved	 Dialysis Services Confirmed with TSH agreement to resubmit proposal in hemodialysis as opportunities permit with CE LHIN. Verbal agreement with TSH to partner for peritoneal dialysis when program expansion announced. Administrator sits on Rehab Task force and is working on development of project communications plan. Behavioural Management and Mental Health Services Hosted CE CCAC Meeting and presented on responses to Behavioural Management and the Behavioural Unit. Developed Behavioural Response Unit Training Handbook for staff and family members. U-First trained frontline staff from behavioural response unit developed and provided educational sessions for all disciplines. Additional PIECES-trained nurse has been trained as back-up to BRU nurse. Role of Behavioural Resource Nurse expanded into organization of rounds and internal consultation. RCSS assumed responsibility for quarterly

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		 Mental Health Framework implementation. Internal audit conducted to identify demand for mental heath services as the primary diagnosis. Snozelen Cart has been purchased through volunteer funds to support programming: behavioural management palliative care dementia care bed bound residents Education for staff on the use of the Snozelen cart organized for January 2008.
		 Younger Persons Converted one decommissioned smoking room to a Games Room to promote independent activities for the younger residents. Resources to date include: DVD/VCR player board games 2 resident computers computer games CD player DVDs, CD, videos To add additional resources as identified with Residents' Council in 2008. Support Group for Younger Residents facilitated by Social Work was implemented Oct. 2007.
4. End of Life Care To promote the respect and dignity of all residents and families during palliation.	Achieved	 Partnership with VON to provide onsite Palliative Care workshop and ongoing support. Social work counsellors, Coordinator of Spiritual and Religious Care and volunteers attended workshop. HAC provided leadership with physicians conducting inservices on all units on palliative care. Family Committee sponsored Family Education Night held in June 2007. Medical Director presented on end of life care and levels of intervention. Good response from families. Inservices provided to staff by an Imam on cultural practices and caring for the Muslim body after death. Ad Hoc committee formed to review and improve practices around end of life care to report in 2008.

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5. Quality Of Life To continue to strengthen our culture that characterizes services that are respectful and supportive and enable residents to achieve their quality of life priorities.	Partially Achieved	 Revised mealtime assistance training program to reflect new volunteer roles. Offered 3 training sessions. Promoted youth volunteers in a support role and portering. Implemented a series of quarterly special events "Around the World" to celebrate ethnic communities and cultures reflected in the home. Folk Art council involved in the presentation of ethnic events. Implementation of Life's Tapestry Wall process for changing and updating completed. Planning and implementation Residents' Council and Family Committee. Selected alternative BPP to continue implementation into 2008. Sourcing for ethnic dietary foods in progress but not completed. Improved response to RC & FC. Additional auditing to ensure sustainability for 2008. Recruitment of young volunteers reflective of our cultural community. Multiple offers to NP groups, service groups, Brownies, Guides and Beavers to increase involvement in the home. Development of French Cultural Themed lounge in conjunction with French community. Agreement to participate in Toronto Intergenerational Partnership Program. Adopting a Grandparent Program with St. Victor's Catholic School.
6. Environment To maintain an internal and external home-like environment that will promote resident safety, security, dignity and comfort.	Achieved	 Life's Tapestry Wall initiated. In process of identifying furnishings for refinishing and replacement. Proposals submitted for : BRU TV Lounges Decommissioned smoking rooms Games room Garden Plan Stage one flooring replacement completed. Additional security cameras installed.

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			 Increased consultation with CRO. To meet with Residents' Council and Family Committee. Expansion of Home Watch expected for 2008.
7.	Resident Safety To develop a home-specific approach to meeting and maintaining full compliance with all Required Organizational Practices (ROPs) as prescribed by CCHSA. To complete a corresponding prospective analysis for 2007. To sustain previous gains in the prevention and management of infections in the Home. To strengthen staff knowledge base on infection control prevention and control practices.	Achieved	 Focus on falls on admission for ROP 2007. 100% mask fit testing completed. Review of IC practices conducted based on UTI rates. Inservices completed and changes to practices established. IC reports used for proactive intervention when anomalies identified. Maintained high rates of immunization. Developed door postings for cautions in Flu and Cold Season. Developed handouts for families for use in the event of an outbreak. Home-specific handouts for health and safety education.
8.	Human Resources To continue to implement and maintain systems and educational processes to achieve a demonstrable culture of safety.	Achieved	 Created tracking document to assist managers in monitoring staff participation in Heath & Safety Inservices. 93% certification of JOHSC members. New members to complete in 2008. 100% managers completed required training. New building inspection schedule implemented with reports submitted to JOHSC for feedback. Increased visibility with use of lanyards for all staff and safety code information. Increased visibility of Boards and content to promote interest. Achieved targets for MSD and WHIMIS training in the absence of an SSE. Plan with SSE for 2008 based on 2007 evaluation.
9.	Volunteers To strengthen community partnerships and increase the role of youth volunteers in the Home.	Achieved	 Developed community partnership with VON Hospice. Community Open House held June 2007 to promote interest in volunteering. Recruitment packages sent out to 12 area secondary schools for youth volunteer recruitment. 60% increase in volunteer hours January to September.

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		 Average hours for youth volunteers increased to 55. Youth council established. Established partnerships for intergenerational programming and youth groups.
 10. Communications & Marketing To continue to strengthen communication with residents and families in order to increase satisfaction with our information. To promote the availability of FLS in LTC. To educate health care partners on specialty services at Bendale. To enhance the communication of the Home with our community and cultural partners. To improve resident information management, providing opportunities for staff to upgrade their computer skills as required. To reduce (and eliminate, wherever possible) the duplication of data collection and storage. 	Achieved	 Implemented Family and Volunteers newsletters. Developed a family committee brochure for use in recruitment and to provide a base of information on the role of the Family committee for new family members. Resident and Family unit based meetings implemented on all units this year. Family committee sponsored one educational event for families. Good turnout. CCAC meeting and open house to promote specialty services at Bendale. Good turnout and interest especially in Behavioural approaches. Translation of Home Mission Statement into French completed. Ad Hoc committee for the marketing of FLS to start work on implementation of marketing plan in 2008. Updated information centre boards to ensure current and relevant information available. Increased interest from Hindu and Muslim communities to support their faith groups in the Home. Educational material developed for each department, specialty services. Series of poster boards for community displays, etc. Home was represented at CE LHINS symposium and provided a display of services available. Educational materials for promoting pandemic planning, flu shots, what to do in the event of outbreaks and other infection control topics. Created and implemented a parking pass system in an effort to provide some control, over illegal parking on site. Increased transfer of data entry from managers to clerks. Expansion of master file system. Initial steps taken for reorganization of computer work groups.
11. MOHLTC Standards To ensure achievement of compliance standards while maintaining new and innovative	Partially Achieved	 Auditing process remains labour intensive and an ineffective use of manager's time. Unmet in resident care resolved in 2007.

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approaches to care.		• Environmental issues remain outstanding with
		requirements to complete flooring.
		• Education on standards completed by managers.