HOMES FOR THE AGED DIVISION ACHIEVEMENT OF 2007 OBJECTIVES LAKESHORE LODGE

Objective	Success	Indicators of Achievement
To operate Lakeshore Lodge in a manner that maintains compliance with applicable legislation, while maintaining innovation and creativity.	Achieved	 No unmet standards. Continued to monitor our practices with regular rounds and audits. Responded to all complaints and expressions of concern by all clients/client groups in a timely manner. No repeat complaints.
To continue to implement and maintain systems and educational processes to achieve a demonstrable culture of safety.	Achieved	 Implemented the Divisional revised core H&S training at Lakeshore Lodge. Increased the involvement of the JHSC in plans and implementation strategies. Evaluated the effectiveness of training of the staff in Safe Resident Handling, ceiling lifts, floor lifts, high-low beds, Carendo chair, on reduction of MSDS. Enhanced workplace wellness at Lakeshore Lodge, consistent with Divisional policy; inservice provided to staff on the new <i>Canada's Food Guide</i>.
To implement minimum one new mechanism to assure consistent staffing.	Achieved	 A push was made in hiring new registrants, with success. A number of enhancements were made to improve calling-in practices by the Customer Service Office.
To participate in the Divisional plans to facilitate staff learning related to computer literacy.	Achieved	 Provided training to staff related to their use of the RAI-MDS system. On-the-spot training provided to staff completing Accreditation questionnaires.
To increase awareness of availability of opportunities for professional development of staff, including courses offered by the City of Toronto.	Achieved	• Developed action plan at HMC meeting to improve communication to staff individually and in groups.
To implement the best practice guidelines related to delirium/depression/dementia at Lakeshore Lodge.	Achieved	• During 2007, all the training for PCAs has been completed, while training of the registered staff is very near completion. The Evaluation tool will be developed and implemented in 2008.
To evaluate the implementation of <i>Live to Eat</i> and mealtime assistance enhancements, and modify as required.	Achieved	• HMC assessed the extent of implementation of <i>Live to Eat</i> and developed action steps to modify approaches as required and began implementation of action plan.

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To enhance customer service by taking steps to ensure consistent staffing in the support assistant C (customer service clerk) function.	Achieved	CSO currently staffed consistently.
To train all staff on new Divisional modules related to residents' rights and safety.	Achieved	• Implemented (2007 portion of) training plan.
To strengthen communication to residents and families in order to improve satisfaction with our information management.	Achieved	• Posted Assignment Boards on all units; made business card holders for Nurse Managers and Social Workers available for contact information.
To enhance the role of Lakeshore Lodge Programs & Services staff involvement in the MOHLTC's LTC-MH framework.	Achieved	 Manager of Programs & Services and FT Social Worker attended training. Social Worker also trained to be PIECES Enabler.
To participate in Divisional plan to improve resident safety.	Achieved	• Researched CCHSA's Required Organizational Practices; and developed a plan to implement ROPs at LL.
Continue the implementation of MDS-RAI.	Achieved	• MDS-RAI implemented according to MOHLTC schedule.
To participate in Divisional plan to provide opportunities for staff to upgrade their computer skills.	Achieved	• During 2007, there has been full implementation of RAI-MDS which is all computer based. There has been a marked improvement in staff using PTAC (which is a computer model of ordering non-emergent transfer ambulances).
To minimize the number of unmets related to MOHLTC compliance.	Achieved	• No unmet standards in 2007.
To complete the 2007 capital maintenance projects as identified and prioritized through HFA analysis and the <i>Building Condition</i> <i>Assessment</i> thus contributing to safe environments and the reduction of accidents and incidents.	Achieved	• Identified and communicated home project list, scheduled projects and carried out projects through contractors as indicated and adjusted project schedule as per operational needs and available budget.
To improve the living environment with a view to making it more homelike.	Achieved	 Maintained vigilance and acted on any need for ongoing minor maintenance (e.g. painting touch- up, minor wall repair, minor ceiling tile replacement, minor floor damage, etc.). Paid particular attention to and prioritized any safety concerns.

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		 Maintained attention to décor, using donations accounts as approved for décor items. Consulted with Residents' Council re their priorities. Communicated with and reported to D. Tulk regarding any unanticipated needs. Implemented action plans to improve the front lobby, dining rooms, activity rooms, shower rooms and prioritized areas to be painted.
To plan for and purchase equipment to improve occupational health and safety.	Achieved	 Developed prioritized list of furnishings, equipment for multi-year capital replacement plan;. Completed bed replacement to achieve 100% electric beds. Identified furniture and equipment requiring replacement (e.g. feeding chairs, hot food carts, etc.) to reduce risks to staff safety and acted on prioritized list, in accordance with available resources. When new furniture, equipment were purchased, preceded the introduction with appropriate staff training and revision of written protocols/ guidelines as needed. Monitored introduction of any new equipment through audits and evaluations.
To further strengthen staff knowledge re infection prevention and control (IPC).	Achieved	 Trained staff and fully implemented revised procedures re high and low disinfection. Continued to develop and expand staff education plan re IPC. Mask fit tested new staff and any current staff who had significant facial changes. 90% of staff mask fit tested.
Begin the preparation of the Home for accreditation survey in 2008.	Achieved	• Preparation process well under way for survey in June 2008.
To assess the need to further develop community partnerships.	Achieved	 Reviewed existing community partnerships. Discussed potential new community partnerships at HMC. Enhanced partnerships with several community partners.
To develop a plan to create a therapeutic outdoor environment.	Achieved	 Struck task force, including resident, family and HAC reps. Developed a plan. Published minutes.

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		• Process to begin with Humber students in January 2008.
To explore feasibility of increasing the presence of pets in the home.	Achieved	 Reviewed policy and weighed interest of Residents' Council, Family Committee. Developed a plan (implementation of plan contingent on acquiring PRCs for pet handlers).
To implement a resident wish program.	Achieved	 Reviewed plan of M/HAC. Began implementation of discussions at annual CT conferences.