## LONG-TERM CARE HOMES AND SERVICES DIVISION ACHIEVEMENT OF 2008 OPERATING OBJECTIVES Bendale Acres

| Objective  | Success      | Indicators of Achievement   |
|--|--------------|---|
| Falls Reduction     To achieve a reduction in the number and severity of outcomes for resident falls.  | Not Achieved | <ul> <li>Project not extended beyond falls in first month of admission;</li> <li>Data collection initiated to support initiative and will be brought forward to 2009 as required for survey.</li> </ul>   |
| 2. Expansion Of Community Support Programs To determine and implement community needs driven adult day program services within existing resources and to plan and implement the amalgamation of Bendale and Seven Oaks Adult Day Programs. | Achieved     | <ul> <li>Focus of 2008 was the planning and implementation of the amalgamation of the ADP program from Seven Oaks; this was achieved in September 2008;</li> <li>Contributed to the development of options for the future of Adult Day Programs with focus on hard-to-serve clients;</li> <li>Adjustments to programming, transportation and staffing to accommodate the increased number of clients served in ADP;</li> <li>Placed 4 volunteers in ADP with over 100 hours since June 2008;</li> <li>Recruitment notices posted on Volunteer TO website and oriented 1 volunteer from Seven Oaks with merger of Program.</li> </ul>  |
| 3. Psychogeriatric and Mental Health Services  To support the transition and successful integration of applicants with mental health diagnosis into LTC.   | Achieved     | <ul> <li>Identified limits to resources and numbers and types of behaviours of mental health that we can successfully manage;</li> <li>Expanded role of Behavioural Resource Nurse to accept referrals from all units, develop and do rounds for follow-up with Dr. Barsky and with unit teams;</li> <li>Successfully introduced and used the mobile crisis team for management of issues beyond the capacity of resources;</li> <li>Identified numbers and types of mental health diagnosis as part of future planning for location and dedication of education and staffing resources;</li> <li>Completed year 3 BRU report with analysis of behavioural incidents and evaluation of the impact of BRU;</li> <li>Completed and submitted a proposal to Health Force Ontario on the development of technology based education for LTC staff based on the BRU model. (Proposal not accepted);</li> <li>Completion of LTC/Mental Health Framework checklist; home is on target with implementation.</li> </ul> |

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| 4. | Risk Reduction  To achieve a reduction in risk to resident safety in a minimum of one area of identified clinical risk.  | Not Achieved | Areas of risk identified completion of QI projects remains outstanding and will be brought forward to 2009.   |
| 5. | Human Resources To identify innovative approaches to wellness that will support the physical and emotional wellbeing for all staff and to promote planning and implementation for areas identified in Workplace Violence Survey. | Achieved     | <ul> <li>SSE implemented <i>Passport to Education</i> to encourage and promote attendance at mandatory inservices as well as opportunities to develop additional skills and knowledge;</li> <li>Education stats reflect commitment of all staff and managers to education on safety;</li> <li>Health &amp; Safety information days;</li> <li>Nutrition month displays and information;</li> <li>Wellness month celebrated in October 2008 with speakers, events, demonstrations and information available;</li> <li>Inservices on accessing EAP well attended. Managers encouraged and recommending services to staff in confidence;</li> <li>Staff attendance and response to inservices on Workplace Violence exceptional;</li> <li>Regular inservices on Customer Service;</li> <li>Discussion and planning for succession in Nursing, Building Services, Programs &amp; Services and Administration;</li> <li>6 Acting assignments in place to develop staff and managers as part of succession planning;</li> <li>Reassignment of responsibilities to balance workload.</li> </ul> |
| 6. | Volunteers To enhance the role of Youth Volunteers and develop a revitalized role for the 55+ age group.   | Achieved     | <ul> <li>Developed and distributed recruitment packages for summer opportunities in May and return to school opportunities in August;</li> <li>Implemented youth volunteer activities based on the suggestions from the Youth Summit:         <ul> <li>Saturday Bingo</li> <li>YOC survey completion</li> <li>Travelling Ice Cream Cart</li> </ul> </li> <li>Provided recognition relevant to youth expectations:         <ul> <li>Reference letters for scholarships</li> <li>100-hour certificates provided at volunteers dinner</li> <li>Input into changes through satisfaction survey. Results to impact in 2009.</li> </ul> </li> <li>Provided additional training and orientation in infection control, dealing with difficult</li> </ul>  |

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|     |   |                       | behaviours, resident safety and escort policies.   |
| 7.  | Continuous Quality Improvement To increase the profile and relevance of CQI for managers and staff to all levels in the home. | Achieved              | <ul> <li>Noted improvement in manager's collection and utilization of data to determine areas for improvement;</li> <li>Successful In-House Quality Fair profiled the many initiatives and activities over the past year; excellent feedback from residents, staff families and visitors to the home; to continue this in 2009.</li> </ul>   |
| 8.  | Communications To increase communication to residents, staff, families and volunteers.  | Achieved              | <ul> <li>Communication boards updated and current relevant information available for residents and staff, families, volunteers and visitors;</li> <li>Other posting areas defined; all postings require initial for approval;</li> <li>Family newsletter developed and sent quarterly featuring resident safety, infection control and updates on activities and happenings in the home.</li> </ul>  |
| 9.  | Accreditation Survey 2009 To prepare for a successful accreditation.  | Achieved              | <ul> <li>Exceeded divisional requirement for staff participation in survey instruments completion; Volunteer support sought and provided to heighten the profile of Qmentum and identify that we are working in partnership;</li> <li>Panel for Qmentum set up in communications centre and visual roadmap developed and posted to identify timelines in process;</li> <li>Bendale hosted Qmentum steering committee for ADP and contributes to completion of survey instruments; will continue to prepare to be the survey site for ADP in 2009 survey;</li> <li>Quality roadmaps received and presentation prepared for General Staff meetings, Medical staff, Volunteers, residents and families in February 2009.</li> </ul> |
| 10. | Mayor's Priorities To support and lead assigned Mayor's Priorities for 2008.  | Partially<br>Achieved | <ul> <li>Contacted schools regarding opportunities for completion of mural;</li> <li>Mural artist posted as volunteer opportunity and opportunity of the week;</li> <li>Meeting with MOW to discuss potential for provision of ethnically diverse meals to address the changing face of the community we serve;</li> </ul>   |

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|  |                       | <ul> <li>Planning in 2009 for introduction and implementation of program components for Safe Seniors Centre at Bendale:         <ul> <li>Nutrition support through low cost meal service and take away</li> <li>Assistance to entry to community supports</li> <li>Education on safety and wellness</li> <li>Drop in activities</li> <li>Telephone support through current and future volunteers</li> <li>Expansion of current tax clinics</li> <li>Provide support and space for other community-based seniors clinics (i.e. VON, foot care, etc.)</li> </ul> </li> </ul>  |
| 11. MOHLTC  To ensure achievement of compliance standards.   | Partially<br>Achieved | <ul> <li>Previous unmet standards cleared in annual review in September 2008;</li> <li>One unmet standard in annual review; action plan implemented and follow-up audits indicate compliance;</li> <li>Compliance discussed in team and department meetings; regular reviews required to maintain standards;</li> <li>Increased regularity of environmental inspections and immediate intervention.</li> </ul>  |
| 12. Cultural Diversity  To increase opportunities for involvement of our cultural community partners to influence the care and service at Bendale. | Achieved              | <ul> <li>Feasibility report on the introduction of Hallal meat completed;</li> <li>2009 plan to increase cultural meal availability to Meals-on-Wheels and cafeteria service;</li> <li>Continued recruitment of French speaking volunteers;</li> <li>Increasing numbers of volunteers reflect the cultural and religious diversity of our community, i.e. South Asian, Tamil, Filipino and Chinese;</li> <li>Programs &amp; Services continue to provide special events profiling various cultures and dietary choices;</li> <li>Expansion of Spiritual and Religious Care events to be more inclusive of all religions.</li> </ul> |