

**LONG-TERM CARE HOMES AND SERVICES DIVISION  
ACHIEVEMENT OF 2008 OPERATING OBJECTIVES  
Seven Oaks**

<b>Objective</b>	<b>Success</b>	<b>Indicators of Achievement</b>
<b>Governance</b>		
1. To continue the leadership necessary for Seven Oaks to achieve updated 2008 deliverables related to LTCHS multi-year plan for the Mayor's priorities.	Achieved	<ul style="list-style-type: none"> <li>• Enhanced Volunteer youth council;</li> <li>• Participated in "Clean up Days";</li> <li>• Updated and refined Interpreters List;</li> <li>• Provision of parking on site for staff, families and visitors.</li> </ul>
2. To provide leadership in the implementation of the LTC-MH framework for Seven Oaks.	Achieved	<ul style="list-style-type: none"> <li>• Submitted indicator data for the project;</li> <li>• Continued to provide education related to dementia, responsive behaviours and mental health within Seven Oaks; PIECES team meetings being held monthly at SO;</li> <li>• Developed a partnership with RVHC – Pathways – a housing complex for clients with mental health issues; staff member on HAC and clients starting to inquire re volunteering at Seven Oaks.</li> </ul>
<b>Partnerships</b>		
3. To strengthen integration and enhancement of health services within the CE LHIN and participate in integration meetings within the CE LHIN.	Achieved	<ul style="list-style-type: none"> <li>• Participated in the CoT LHIN collaborative meetings and other meetings within the CE LHIN.</li> </ul>
<b>Quality Improvement</b>		
4. To participate in the planning of the division-wide 2009 accreditation survey under the Qmentum program.	Achieved	<ul style="list-style-type: none"> <li>• Managers attended LTCHS training on Qmentum;</li> <li>• Attended RC&amp;S meetings re completion of LTC survey;</li> <li>• Participation in provision of education about Qmentum to HMC, HAC, Family Committee, Residents' Council, all staff and Volunteers;</li> <li>• Initiated a review of all applicable standards, questionnaires, indicators and instruments;</li> <li>• Ensured that SO has fully adopted and incorporated all ROP's into day-to-day operation;</li> <li>• Family Committee participated in focus/work groups as requested;</li> <li>• All managers attended ethics education;</li> <li>• Ensured 100% of targeted staff completed on-line surveys; excellent support exhibited by ASU staff in assisting completion of surveys on-line for staff.</li> </ul>

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		<ul style="list-style-type: none"> <li>• Ensured 100% of managers/staff completed Effective Governance, Long-Term Care and medication surveys.</li> </ul>
<b>Human Resources</b>		
5. To participate in the preparation of LTCHS HR plans by providing input and feedback on draft HR plan. Improved HR processes in home.	Achieved	<ul style="list-style-type: none"> <li>• Implemented new HR to hiring process;</li> <li>• Hired new staff in front line positions;</li> <li>• Maintained and strengthened Workplace Wellness initiatives at Seven Oaks;</li> <li>• Participated in “Managing Your Career” – three registered staff.</li> </ul>
<b>Quality Improvement</b>		
6. To implement the division’s system of integrated quality management.	Achieved	<ul style="list-style-type: none"> <li>• Participated in 2<sup>nd</sup> annual Residents’ Council Summit;</li> <li>• Analyzed and reported home-wide processes related to near misses and adverse events;</li> <li>• Implemented CIS in early 2008;</li> <li>• Provided feedback re revised risk indicators.</li> </ul>
<b>Culture of Safety</b>		
7. To continue to enhance the culture of safety related to workers, residents, families, volunteers and family/visitors through a team approach.	Achieved	<ul style="list-style-type: none"> <li>• Reinforced to all managers the need for ongoing diligence and positive response to H&amp;S issues in the workplace;</li> <li>• Participated in the JHSC networking meetings to enhance health and safety learning;</li> <li>• Reviewed, monitored and analyzed sick time and WSIB and identified strategies in order to make improvements;</li> <li>• Reviewed the findings of the violence in the workplace survey and planned for in-service/ training on violence in the workplace and bullying in the workplace training sessions;</li> <li>• Implemented and promoted <i>Respect in the Workplace</i> within the home;</li> <li>• Delivered fire safety, wound care and restraint use in-services to families and residents;</li> <li>• Resident Care conferences inclusion of resident safety at conference meetings with residents and families;</li> <li>• Continued to strengthen infection control practices with staff which included formal training and informal discussions about near misses and adverse events;</li> <li>• Ensured annual lock-out tag-out program in place;</li> <li>• Conducted emergency code training;</li> </ul>

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		<ul style="list-style-type: none"> <li>• Included MSD hazard category on JHSC workplace inspection and supervisor's inspections;</li> <li>• Ensured staff knew how to use eyewash station – one-on-one training provided by Staff Educator.</li> </ul>
<b>Financial</b>		
8. To participate in the review of options to reduce the City's net contribution and expand partnerships integration and collaborative models of care.	Achieved	<ul style="list-style-type: none"> <li>• ADP services from the ADP located at RVHS were re-located to Bendale Acres due to increasing costs associated with the program.</li> </ul>
<b>Information Management</b>		
9. To implement a streamlined purchasing process and customer service function.	Achieved	<p><u>Purchasing</u></p> <ul style="list-style-type: none"> <li>• Participated in the purchasing work group to oversee the development of new policies, procedures, controls and users guide;</li> <li>• Planned and organized for the implementation of electronic processing of Purchase Orders, expanded use of p-cards and move towards a 3-way match.</li> </ul> <p><u>Customer Service</u></p> <ul style="list-style-type: none"> <li>• Implemented recommendations from the Customer Service Work Group as approved by the LTCHS Committee.</li> </ul>
10. To implement the division's Strategic Information Systems Plan.	Achieved	<ul style="list-style-type: none"> <li>• Successfully implemented RAI-MDS at SO and participated in the divisional and provincial training for RAI-MDS; provided to staff as required in improving computer-based technology.</li> </ul>
<b>Human Resources</b>		
11. To have regular meetings with staff to assist in fostering improved respect in the workplace.	Achieved	<ul style="list-style-type: none"> <li>• General staff meetings, unit team meetings and meetings held with staff to discuss how to improve relationships between staff and managers.</li> </ul>
<b>Leadership and Partnership</b>		
12. To have Unit Teams implement and evaluate enhanced falls prevention strategies that reduce the risk of and the number of injuries from falls by a minimum of 20%.	Partially Achieved	<ul style="list-style-type: none"> <li>• Completed a root cause analysis for falls; RCA reviewed with RC&amp;S Committee;</li> <li>• Developed risk reduction strategies based on findings and leading practices;</li> <li>• Achieved 18% reduction in falls over 2008 by implementing fall prevention strategies.</li> </ul>

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<b>Resident Care</b>		
14. To continue to implement the psychogeriatric and mental health services framework to maximize successful admission placement and strengthen the collaboration with outreach team.	Achieved	<ul style="list-style-type: none"> <li>• A series of inservices was arranged with the RGP on Managing Challenging Behaviours and personal demonstration and practice sessions held; provided training to registered staff re ability to manage behavioural responses; assessed training needs and developed a plan to deliver identified training to unit teams;</li> <li>• Meetings with Outreach team, RGP and SO staff continued throughout the year.</li> </ul>
<b>Compliance</b>		
15. To reduce the number of unmet standards in the areas of dietary and environmental MOHLTC compliance.	Achieved	<ul style="list-style-type: none"> <li>• Reduced unmet standards by three during 2008 annual visit; reviewed information/evidence on specific related unmet standards and observations cited by the MOHLTC in compliance reports;</li> <li>• Monthly audits were completed to ensure compliance with standards;</li> <li>• Currently awaiting Dietary Compliance follow-up visit regarding two remaining unmet standards.</li> </ul>
<b>Residents' Council</b>		
16. To further strengthen the role of the Residents' Council by continuing to meet with residents, Administrator and Resident-Client Advocate to work on plan of action developed from Residents' Report to Administrator.	Achieved	<ul style="list-style-type: none"> <li>• Regular meetings held with resident representatives and Resident-Client Advocate regarding report received by Administrator;</li> <li>• Meetings led to the development of a Resident Letter which will be provided to all residents at time of admission;</li> <li>• In early 2009, will have a final meeting to finalize project.</li> </ul>