

**LONG-TERM CARE HOMES AND SERVICES DIVISION  
ACHIEVEMENT OF 2009 OPERATING OBJECTIVES  
CASTLEVIEW WYCHWOOD TOWERS**

Objective	Success	Indicators of Achievement
<b>Resident Care</b>		
1. To have each Care Team implement and evaluate enhanced falls prevention strategies that reduce the risk of and the number of injuries from falls by a minimum of 10% in 2009.	Achieved	<ul style="list-style-type: none"> <li>• In 2009, there was a 23% decrease in the number of resident falls.</li> </ul>
<b>Leadership and Engagement</b>		
2. To further develop a plan that will enhance volunteer involvement of the 55+ age group cohort as well youth volunteers.	Achieved	<ul style="list-style-type: none"> <li>• Participated in the Therapeutic Clowning Pilot Program with Ryerson Chang School.</li> <li>• Developed a volunteer student youth council.</li> <li>• Volunteer groups involved in resident programming include: <ul style="list-style-type: none"> <li>○ U of T</li> <li>○ Price Waterhouse Cooper</li> <li>○ Canadian Institute of Chartered Accountants</li> </ul> </li> </ul>
3. To increase and strengthen our leadership role through collaboration and partnership with LHINs, Ministry of Health and Long Term Care (MOHLTC), Workplace Safety and Insurance Board (WSIB), Accreditation, external stakeholders and community neighbourhoods.	Achieved	<ul style="list-style-type: none"> <li>• The administrator is a member of the TC LHIN Mental Health Steering Committee.</li> <li>• Partnered with MOHLTC, OHQC, ISMP on applying LEAN to Medication Reconciliation (63 improvement ideas were generated through the Values Stream Map).</li> </ul>
4. To continue to enhance the culture of safety related to workers, residents, client's families, volunteers and the general public through a team approach.	Achieved	<ul style="list-style-type: none"> <li>• High Impact Leadership Program for Nurse Managers.</li> <li>• Safety is a standing agenda item on each unit's Resident Care meeting (monthly).</li> </ul>
5. To prioritize and implement the HR plan based on need.	Achieved	<ul style="list-style-type: none"> <li>• Attendance Management implemented by all disciplines.</li> <li>• Volunteer Student Youth Council initiated.</li> <li>• Participated in the Therapeutic Clowning Pilot Program with Ryerson.</li> <li>• 16 students were permanently placed in the Home.</li> <li>• Evaluations report positive student placement experiences.</li> </ul>

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		<ul style="list-style-type: none"> <li>• 34 staff attended 19 orientation sessions.</li> <li>• 20 volunteers attended Food Handlers Education.</li> <li>• In-house development opportunities: <ul style="list-style-type: none"> <li>○ IPAC Nurse Manager</li> <li>○ AR Nurse Manager</li> <li>○ Palliative Care Pilot Lead</li> <li>○ PIECES Training/Behavioural Support Clinic</li> <li>○ Unit Champions – Falls, Skin &amp; Wound Care</li> </ul> </li> </ul>
<b>Safety</b>		
6. To collaborate with CUPE Local 79 in achieving a minimum of 20% improvement in each OH&S continuous improvement project by year-end.	Achieved	<ul style="list-style-type: none"> <li>• There has been a 20% reduction in MSDs in the nursing department in 2009 from 2008.</li> </ul>
7. To act on identified priorities for enhancing resident/client safety through established Standing Service Committees, Quality Councils and/or Quality Teams: 1) managing behaviours; 2) medication managements; 3) pain management; 4) falls prevention; 5) skin and wound care	Achieved	<ul style="list-style-type: none"> <li>• Implemented Multisensory Stimulation Program.</li> <li>• Medication Reconciliation QI activity reduced the process from 12 hours to 1-1/2 hours per resident.</li> <li>• Pain assessments are completed for each resident.</li> <li>• Falls reduced by 23% in 2009.</li> <li>• Skin &amp; Wound Care: Ulcers in the Home were reduced by 28% in 2009 as compared to 2008.</li> </ul>
<b>Information Management and Communication</b>		
8. To identify and implement the priority strategies included in the communication plan.	Achieved	<ul style="list-style-type: none"> <li>• Use of PA system has decreased.</li> <li>• Improved use of communication aids.</li> <li>• Improved resident and family satisfaction rates regarding communication.</li> </ul>
9. To implement e-Health strategies of the GTA LHINs.	Achieved	<ul style="list-style-type: none"> <li>• Some applications from TC CCAC transmitted electronically.</li> </ul>
<b>Integrated Quality Management (Quality, Safety, Risk, Resource Utilization)</b>		
10. To ensure that the home is prepared for the May 2009 on-site accreditation survey.	Achieved	<ul style="list-style-type: none"> <li>• Accreditation received.</li> </ul>