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Report 2024-048

Report Title: Golden Plough Lodge - Quarter 1, 2024 Update

Committee Name: Community Health

Committee Meeting Date: April 2, 2024

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Reviewed by: Glenn Dees
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Golden Plough Lodge

Approved by: Jennifer Moore, CAO

Council Meeting Date: April 17, 2024

Strategic Plan Priorities: Innovate for Service Excellence
 Ignite Economic Opportunity
 Foster a Thriving Community
 Propel Sustainable Growth
 Champion a Vibrant Future

Information Report

“That the Community Health Committee, having considered Report 2024-048 ‘Golden Plough Lodge, Quarter 1, 2024 Update’, for information; and

Further That the Committee recommend that County Council receive the report for information.”

Purpose

This report for information will provide an overview of the Golden Plough Lodge (GPL) accomplishments and an operational update for Quarter 1 of 2024.

Background

The GPL is Northumberland County’s municipally owned and operated long-term care home. First established in the 1850’s as a County House of Refuge, the GPL has a long-established history of caring for others.

Today, the GPL serves others whose needs cannot be met in the community and require both personal care and nursing expertise. The GPL is first and foremost home to 151 residents, cared for and supported by 243 dedicated staff members providing Nursing Care, Dietary Services, Life Enrichment Programming, Environmental Services and Administration Support.

As an operating division of the Corporation of the County of Northumberland, the following core values are embedded in all facets of the Golden Plough Lodge operations:

- Accountability
- Care & Support
- Collaboration/Communication
- Honesty & Integrity
- Innovation & Excellence
- Mutual Trust and Respect

Consultations

The GPL Senior Management Team.

Legislative Authority / Risk Considerations

The GPL is accountable under the Ministry of Long-term Care (MLTC) and legislation under the *Fixing Long-Term Care Act, 2021, (FLTCA)*.

Discussion / Options

The GPL staff and leadership have had a busy and productive first quarter. The following are highlights of accomplishments from all departments within the GPL – Nursing, Administration, Dietary, Life Enrichment and Environmental Services.

Administration

Staff Huddles

Staff huddles were implemented as a pilot in Q4 of 2023 and continued into Quarter 1 of 2024. The huddles are conducted bi-weekly by the Senior Leadership Team (SLT). Each SLT member visits a home or department area and shares pre-determined, relevant information with staff. For example, a topic in one week's huddle was highlighting the ministry proactive inspections and what to expect from the inspection. Another topic was a reminder to staff on Residents Right to Privacy under the FLTCA. The intent is to enhance communications with quick (approx. 15 minute) whole-home type updates being provided by a member of management in each of the home areas and departments. These huddles have received positive feedback from front-line staff who are reporting feeling more connected to the workplace since implementation.

Ministry Proactive Inspection

The GPL receives inspectors from the MLTC Inspections Branch for various reasons in any given year. Inspection visits now include proactive inspections meant to take place annually at all long-term care homes in Ontario. On February 12, 2024 to February 16, 2024 GPL received a proactive inspection visit from two inspectors.

The following inspection protocols were used during this inspection:

- Resident Care and Support Services
- Skin and Wound Prevention Management
- Residents' and Family Council
- Medication Management
- Food Nutrition and Hydration
- Safe and Secure Home
- Infection Prevention and Control
- Quality Improvement
- Pain Management
- Falls Prevention and Management

During the course of this inspection, the inspectors made relevant observations, reviewed records and conducted interviews, as applicable with staff and residents. There were no findings of non-compliance. The inspection was to take 7 days; however, the inspectors commented that due to the GPL's advanced preparation for the proactive inspection, their inspection time was cut down to 5 days. The inspectors shared positive observations of the GPL overall in respect to care provided to residents and staff.

Engagement Committee

The Engagement Committee met in February 2024 for the first time this year. This meeting was to reestablish the committee and its purpose. The committee worked to develop a new Terms of Reference and action items to increase the visibility of the committee at the GPL. The group developed the following purpose for its structure and will continue to meet bi-monthly to develop an action plan and goals for the group.

The Committee supports the Home's vision, mission, values and employee quality of work life through the following responsibilities:

- To help promote respect, passion, teamwork, collaboration, good communication, responsibility, and growth in the workplace and between and among all staff and departments at the GPL.
- Incorporate our Vision, Mission and Values to understand, assess, and implement strategies to enrich the time spent at work and allow for work activities to become more rewarding.
- Encourage collaboration by ensuring everyone is provided with an opportunity to provide input into recommendations, proposed changes, assist with implementation plans, and provide feedback after the change has occurred.
- Review suggestions from employees as it related to working conditions and services.
- Improve the workplace environment by providing a forum to discuss issues/needs and make recommendations for addressing concerns.
- Promote and guide the development and analysis of an annual employee engagement survey.
- Provide advice and guidance to the Administrator and the Leadership Team to support employee engagement and improve internal relations.

Peer Support

The GPL developed a new peer support group in Quarter 1. Eight interested staff attended 4 days of training. The team soft launched around November 3, 2023, and then hard launched on January 25, 2024. Since the start of the Peer Support Program, the group has assisted staff,

residents, and families 51 times. Peer support is about people helping people. Trained Peers are highly valued by colleagues in that they understand the work culture, are easily accessible, and can provide confidential support in a variety of circumstances. Peers are often the first to notice subtle changes in a colleague's behaviour and can respectfully inquire about the colleague's wellbeing. At the GPL, formal peer support does not replace the need for professional mental health services such as Employee and Family Assistance Plan and does not deal with performance issues. However, peers are available to listen, encourage and guide coworkers to the appropriate people and resources for help. Although peers are not counsellors or experts in mental health issues, they are trained to provide emotional first aid, and support.

Parking and Security

To enhance the safety and security of the facility, the GPL transitioned to a single point-of-entry for visitors and members of the public. As of March 4, 2024, all visitors will be directed to enter the building through the west entrance only which is by the administration office. The east entrance will be permanently closed to the public and will only be accessible by key card access. Transitioning to a single-entry point will help streamline and improve the visitor experience, ensuring all visitors follow our sign-in processes, and will help to enhance the security of our home. The west entrance will be open to the public 7 days per week between 7:30 a.m. to 9:30 p.m. Visitors will be greeted at the entrance by security to help them sign in and direct them where to go.

GPL staff may still use both entrances; however, these entrances will require key card access upon entry and exit. Along with the changes to parking, the GPL increased and reallocated accessible and general parking spots to accommodate for visitors coming to the west entrance.

In response to 2 staff vehicle break-ins, lighting has been enhanced around the exterior perimeter of the building, additional cameras have been installed along with signage to reflect premises are monitored.

Nursing

Quality Improvement Plan (QIP) 2024/25

As is a requirement under the FLTCA, all Long-Term Care Homes must have a Quality Improvement Program. This includes developing an annual Quality Improvement Plan, referred to as a QIP.

The QIP focuses on areas of improvement in all departments across the home. The QIP is submitted to Health Quality Ontario annually, and includes a progress report, analyzing the previous year's successes or identified areas for further improvement.

Health Quality Ontario provides priority quality indicators of focus for all areas across the health sector, including Long-Term Care Homes, Hospitals, and Community Care providers. The priority indicators are included in Golden Plough Lodge's 2024/25 QIP and focus on areas such as access and flow, equity, experience, and safety.

The 2024/25 Golden Plough Lodge QIP is posted on the Northumberland County website, as well as on the Health Quality Ontario website.

Staffing

With the support of Northumberland County Council, by approving our Nursing staffing budget, and with additional funding provided by the MLTC, the GPL will be increasing direct line staffing by creating several new Nursing positions.

These new positions will be initiated in April 2024, and include 2 Full time Registered Practical Nurses, and their Part time backfill, as well as 3 full-time Personal Support Workers and their part-time backfill.

These positions will ensure we are meeting the mandatory hours of care requirements set by the Ministry for 2024.

Infection Prevention and Control

There have been no outbreaks in Quarter 1 as the GPL continues to remain vigilant around infection prevention and control in the home.

The MLTC have ended the enhanced masking measures. On March 4, 2024, the MLTC cited that recent trends have shown continued decreases in community level transmission of COVID-19, flu and RSV, as well as decreases in outbreaks in Long-term Care Homes, with lower risk of severe illness and hospitalization amongst residents, and increased vaccination rates. While outbreaks can still be expected, the Ministry anticipates entering a lower risk period of respiratory illness than has been experienced over the past three months. This decision was based on the recent trends and projections, and the advice of Office of the Chief Medical Officer of Health.

It is important to remember that staff and visitors are the primary source of infection for residents in the LTC environment. Aside from frequent and thorough hand washing universal masking is the single most effective means to prevent the spread of infections. Although, masks are no longer required, the GPL still encourages all staff and visitors to continue to do so if they wish to, in order to reduce transmission risk among the GPL's vulnerable population.

Dietary

The dietary departments continues to strive towards excellence in their department. Listening to the needs of the residents, the dietary team held a coffee tasting event for residents so that they could choose a new brand of coffee. Aligning well with the FLTCA, residents should have the choice in what they eat and drink in the home.

Life Enrichment

Resident Council met three times in Quarter 1. Resident Council is currently made up of 15-20 residents and attendance has been increasing over the months due to a very engaged resident president, who travels through the home connecting and encouraging people to attend. Agenda topics vary, at the last meeting the group discussed staff allocation hours, GPL's QIP and any concerns in every department. The agenda also highlights a different resident right at every meeting.

The GPL also had its second Food Committee Meeting which allows a space and time for residents to meet with the Dietary Manager and Supervisor to discuss menu concerns and request any changes. This is where the request for new coffee came up.

There have been many events for residents to enjoy in quarter 1. There was a Wine and Cheese Socials with homemade charcuterie boards that was enjoyed by the group. The Armchair Travel program explores a different country every month and continues to be a huge hit among the residents. Meditation has been requested by many residents to be changed to a weekly program so Quarter 1 saw weekly meditation.

The Life Enrichment department continues to have special events like Carnivals and Holiday Socials as well as a Pancake Breakfast and incorporating Black History into its February events. Physical programs like charades, laughter yoga and noodle balloon, have increased in regularity this past quarter.

Environmental Services

The GPL welcomed a new Environmental Services Manager in February, 2024, Jean Harrison. Jean brings with her a wealth of experience and knowledge in long-term care and the many regulations the home must follow.

The program evaluations for Environmental Services have been reviewed for 2023 with goals set for 2024 inclusive of Housekeeping, Laundry, and Maintenance departments.

Departmental education opportunities have commenced with active participation from all departments.

Preventative Maintenance schedules for building systems are being reviewed with life span considerations given to end of life equipment and costs associated with the GPL migration into the new build.

Financial Impact

This report for information highlights some work to date at the GPL and all financial impacts (related to new positions) was previously approved by County Council. There is no additional financial impact with this report.

Member Municipality Impacts

There is no direct impact to member municipalities.

Conclusion / Outcomes

That this report is received for information by Council.

Attachments

N/A