

# 2019 SHA CEO Long-Term Care Facility Visits

Since spring 2013, Saskatchewan Health Authority (previously Regional Health Authorities) leadership have been conducting annual tours of long-term care facilities across the province. The goal of these annual tours is to find out what's working well and what can be improved.

The following pages offer additional information about the CEO findings, by community name.

To access the results of previous CEO long-term care tours and the Resident and Family Survey Results, visit:

[www.saskatchewan.ca/government/government-structure/ministries/health/other-reports/ceo-visits-to-long-term-care-facilities](http://www.saskatchewan.ca/government/government-structure/ministries/health/other-reports/ceo-visits-to-long-term-care-facilities)

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Arborfield Special Care Lodge - 73765  
Community: Arborfield  
Date of visit: August 23, 2019

Please indicate who attended this visit:

(Name)	(Title)
<ul style="list-style-type: none"><li>• Andrew Will</li></ul>	VP, Infrastructure, Information and Support
<ul style="list-style-type: none"><li>• Karri Franklin</li></ul>	Director of Continuing Care, Tisdale and area
<ul style="list-style-type: none"><li>• Kathy Meyer</li></ul>	Facility Manager, Carrot River Health Centre
<ul style="list-style-type: none"><li>• Dennis Bryson</li></ul>	Manager, Support Services

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents were very pleased with the care provided by staff in the facility. Residents commented that food is very good in the facility. They appreciated the activity programming

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- There were no suggestions for improvement raised by the residents

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- It was good to see that the shower room has been repaired since the previous visit
- There are several areas that require attention from maintenance. I will be escalating these for follow-up as they were identified on the previous year's visit. These are:
  - Flashing on exterior canopy has been left to rust and has now stained stonework
  - Counter tops in kitchen are chipped, which creates an IPC risk. While a project to address this has been approved, it has not been implemented
  - Finish on hand railings throughout the facility are worn off and would be difficult to clean properly
  - Flooring is generally in good condition, but the seams where flooring joins need to be re-sealed

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Ross Payant Nursing Home - 73525  
Community: Assiniboia, SK  
Date of visit: September 5, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Brenda Schwan	ED, Primary Health Care, Integrated Rural Health
• Kelly Fish	Director, Continuing Care, Integrated Rural Health
• Cara McDavid	Director, Primary Health Care, Integrated Rural Health
• Christine Fischer	Manger, Ross Payant Nursing Home

Please describe what is working well as identified through your visit and discussions with families and residents:

- Very friendly staff
- Dental Nurse from Moose Jaw visits the residents upon request
- Activities are excellent
- Falls project has been successful
- Individual activities happening in the afternoon

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Residents would like to see more menu choice
- Residents would appreciate more fresh fruit

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Emphasis on a resident centered model of care in Long Term Care

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Assiniboia Union Hospital LTC Facility - 73503  
Community: Assiniboia, SK  
Date of visit: September 5, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Brenda Schwan	ED, Primary Health Care, Integrated Rural Health
• Kelly Fish	Director, Continuing Care, Integrated Rural Health
• Cara McDavid	Director, Primary Health Care, Integrated Rural Health
• Lisa Cairns	Manager, Assiniboia Union Hospital LTC Facility

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents enjoy their beautiful rooms
- Activities are very good
- The Healing Gardens is a facility highlight
- Very strong relationship with local foundation to upgrade equipment

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Residents want more menu choices and meals made on site
- Easier access to outdoor space

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Emphasis on a resident centered model of care in Long Term Care

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Balcarres Integrated Care Centre - 73005  
Community: Balcarres, SK  
Date of visit: August 8, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director Continuing Care
• Sandi Barrie	Facility Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Work has continued on the food menu for improvements, residents noted improvements in food
- Daily huddles continue; led by rotating departments
- Work has been underway to enhance activities based on individual assessment and therapeutic needs
- There is the ability to utilize the town's bus; however, its availability is limited
- Activity board posted and updated and within the sight of public areas
- Signs for residents on walls and throughout the home are used as a mechanism to help residents with wayfinding
- Additional computer stations on wings for use

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Exploring options to enhance safety of wondering residents due to exit seeking and movement through the primary health care area including accessing clinic rooms
- Future improvement opportunity for change medication distribution system
- Opportunity for 5s'ing and Kanban of supplies

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to seek input from residents on menu and food choices
- Ensure safety and quality aspects are considered in capital improvements
- Continue to design activities that meet the needs of the residents

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Battlefords District Care Centre - 73578  
 Community: Battleford, SK  
 Date of visit: April 29, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Shawn Duddridge	Acting Facility Manager
• Lori Nachtegaele	Recreation Worker
• Wilma Peak	Maintenance Supervisor
• Penni Caron	Director of Clinical Integration North
• Deanna Miller	Director of Continuing Care –North Battleford & area
• Karen Kindrachuk	Meaningful Life Specialist
• Neal Sylvestre	Executive Director, Continuing Care North West
• Two Family Members	
• Sixteen Residents	
• Four Staff	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Air conditioner donated for Ward 1 dining room –to get in June
- Upcoming events – Movie theatre outing, bowling, Mother’s Day Tea
- Purchased a soft ice cream machine for Rec from family donation
- Purposeful Rounding is ongoing
- Quality of meals are generally appreciated by residents
- New equipment i.e. dining room tables, tub chair, appreciated by residents/family
- Residents/family provided positive comments on process of celebrating resident birthdays

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Residents unhappy with the use of Styrofoam cups
- Resident concerned about a hole in the sunny side room on Ward 5
- Concern from residents that dietary is doing a very early cleanup at mealtimes on Ward 5
- Residents voiced concern about banging doors closed when staff leaving the room. The find it disturbing in early morning and when napping. Food wagon is also startling
- Family concern regarding Resident Evacuation Procedures in the event of an emergency

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Executive Director of Continuing Care will work in collaboration with other Executive Directors of Continuing Care within the Saskatchewan Health Authority to look for issue patterns that may require follow-up across the province
- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue working with families and residents to make improvements. Any significant concerns identified through the tour will be addressed immediately
- Manager to discuss Styrofoam cup issue with C. Hynatiw
- The hole in Ward 5 –the Facility Manager is aware and is taking steps to rectify
- Early dietary clean up – Assistant manager will speak to NUC for Ward 5 for follow-up The goal is to allow residents sufficient time to enjoy and finish their meals
- Startling noise issues – NUC on Ward will speak to nursing staff regarding the excessive door noise and Assistant Manager will speak to dietary staff about being more diligent in reducing the meal cart noise
- Facility Manager and Director of Continuing Care reviewed and refined their Emergency Preparedness Plan in collaboration with the local Fire Department

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Bengough Health Centre - 73007  
Community: Bengough, SK  
Date of visit: August 20, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Karen Earnshaw	Vice President, Integrated Rural Health
• Shannon Jackson	Manager
• Kelly Fish	Director, Continuing Care
• Lori Tulloch	Director, Primary Health Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- Good fundraising – Two foundations
- Bright, clear, quiet facility
- Visibility Wall
- 2 RNs – Days; 3 CCA – Days; 3 CCC- Nights; 1 RN – Day/Night; Activity staffed with 1 FT and 1 PT; 1 CLXT – 3/week; NP – 1MDx1WK
- Relaxed breakfast
- Nice secure outdoor space
- Involved Geriatric Assessment Team – uses Telehealth
- GPA training for all staff
- Met with four residents
  - Close to home, staff are friendly, family visit

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Roof leaking, (on Capital list); two rooms closed
- No ceiling tracks, curtains in bathroom
- No housekeeping on weekends
- Kitchen needs new appliances, washer on last legs, bi-fold doors need replacing between dining and activity area
- Not enough ‘outings’ but enjoy the patio
- No ‘home-cooking’ in kitchen. No choice in meals but can notify staff if they don’t like something
- Recent ‘room moves’ have upset some residents
- Usually only see nurse practitioner, rarely see the doctor
- Difficult to get diagnosis for long standing ‘behaviors’



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Working on CLXT replacement. Want to train RN to do phlebotomy
- Quality indicators – have focused on increasing assessments, review all triggered quality indicators, update care plans; have 'shared risk agreements'; involve MD, NP & Pharmacy in med reviews
- Focus on improving dining experience and adding choice to meals

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Big River Health Centre - 73590  
Community: Big River, SK  
Date of visit: October 16, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Lisa Major	Executive Director Continuing Care North East
• Monica Slobodzian	Administrative Assistant, ED, CCNE
• Heather	Recreation Coordinator
• One Family Member	
• One Resident	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Food is plentiful
- I like it when I can be outdoors and assisting with the above ground garden
- Will be happy to assist with taking care of plants inside the home for the winter
- Outings to Canwood are fun
- Fall country drives are beautiful
- Early riser; however, if I do not feel well they will bring food to my room
- I enjoy watching figure skating and curling on TV

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Would like to have more soups and salads
- Food is sometimes bland
- We are not given many choices when it comes to meals. I do not like meat and potatoes for two meals a day. I love borscht!
- I find the days sometimes very long and boring. It would be nice if staff had more time to engage and visit. I do not enjoy cards or bingo and they do not do much else
- I get lonely



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Director Continuing Care North East for Prince Albert & Area, Darlene Batty; Facility Administrator, Eloise Kazmiruk, and Executive Director of Continuing Care, Lisa Major to look at patterns of issues that may require follow-up
- Discussion of issues with the family or resident councils will occur. Escalation to leadership done as needed
- Feedback provided will be provided to leadership to help inform improvement efforts in Continuing Care

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Biggar & District Health Centre - 73009  
Community: Biggar, SK  
Date of visit: October 10, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Staci Walker	Care Team Manager
• Gayle Riendeau	Executive Director Acute Care Integrated Rural Health South West
• Dee Stanley	Clinical Resource Nurse

Please describe what is working well as identified through your visit and discussions with families and residents:

- Resident choices – i.e. meals, portions, likes/dislikes, environmental
- Activity variety and recent changes to activity staffing hours (staggered)
  - Recent outings included farm tours – were enjoyed
- Less wandering clients during evenings with activity changes

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Staffing levels during evenings
- Environmental – building temperature, noise levels (high open ceilings with new construction), plans for evacuation during recent wildfire

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The evacuation of residents from the Biggar Facility to Saskatoon City Hospital as a result of a wildfire near the Community is being used to help develop/improve the Saskatchewan Health Authorities' Emergency Preparedness. (i.e. transportation, communication)
- Consider noise reduction in design of new long-term care facilities

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Birchview Home - 73593  
Community: Birch Hills, SK  
Date of visit: July 31, 2019

Please indicate who attended this visit:

(Name)	(Title)
<ul style="list-style-type: none"><li>• Andrew McLetchie</li><li>• One Family Member</li><li>• Nine Residents</li></ul>	VP, Integrated Northern Health

Please describe what is working well as identified through your visit and discussions with families and residents:

- Appreciate from residents and family about access to occupational therapy and physiotherapy at home
- Recreation seen as very supportive. Organizing activities in home and outside of home

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Satellite dish reception not available to all residents. Desire to have more availability in more rooms
- Food issues raised—not always having choices that residents like
- Staff meetings occasionally leave no one on the floor—issue was addressed after being brought up so should not occur any more.
- Desire for Vocera system by staff to allow for better communication in facility. Need for update to phone system in home

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Family Resident Council well attended and will continue with recreation leadership
- Ongoing work on improving dietary experience for residents

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Broadview Centennial Lodge – 73543  
Community: Broadview, SK  
Date of visit: July 29, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Leah Clement	Director, Primary Health Care
• Kayla Goodman	Facility Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Outside repairs of concrete and walkways were completed and greatly improve the safety for residents and visitors
- Recognized that there are benefits from therapeutic recreation and opportunities for improvement
- Daily visual management huddles have been moved from the afternoon to the morning to better plan for care during the day
- Supportive Foundation for the care home
- Community is very supportive of the home and recently purchased a new fridge for activities area
- Considerable work done to reorganize and clean up the nursing station
- Working to enhance the dining experience

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Main air conditioner in kitchen is not working and needing repair
- Benefit from more ceiling lifts in the home
- Continued opportunity to enhance the dining experience

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to enhance the dining experience
- Consider additional ceiling lifts for the home

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Prairie Health Care Centre - 73015  
Community: Cabri, SK  
Date of visit: August 6, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- Larissa Gader Facility Manager
- Beth Vachon VP, Quality, Safety & Strategy

Please describe what is working well as identified through your visit and discussions with families and residents:

- The residents spoke to state they are happy to be at this home. Some commented that the food could be better – too much chicken and macaroni – but also acknowledge that everyone has different preferences with food. The residents' also stated that staff are very caring and are helpful and respectful. Activities are tailored to the residents needs and include some large group activities and some small group or individual activities based on the needs and preference of the resident

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- There was a suggestion to increase variety of the menu choices

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Suggest ongoing communication and evaluation of menu options

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Canora Gateway Lodge - 73772  
Community: Canora, SK  
Date of visit: June 10, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Suann Laurent	Chief Operating Officer
• Leanne Buchinski	Health Services Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- New painting throughout facility
- New furniture and fireplace creates a cozy environment
- Staff are caring and kind
- Facility is clean and well maintained
- Residents dressed and well attended too
- Food is good generally residents stated but they would like to see more authentic cultural foods
- Residents enjoy the students
- Residents enjoy the activities

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Residents stated that nursing desk needs to be redesigned as it is in the way; confirmed by staff and manager
- Old doors to rooms need to be replaced
- Some flooring needs to be replaced

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Great used and leadership with daily visual management!
- This site does purposeful interactions and audits same
- Hang hygiene commitment is evident – 90%
- Seven day/week recreational therapy
- Decreased restraint use



**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Whispering Pine Place - 73591  
 Community: Canwood, SK  
 Date of visit: October 16, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Lisa Major	Executive Director Continuing Care (CC) North East
• Darlene Batty	Director Continuing Care NE, Prince Albert & Area
• Monica Slobodzian	Administrative Assistant, Executive Director, CC
• Seven Residents	
• Three Family Members	
• Beverley	Staff
• Debbie	Staff
• Carol	Staff

Please describe what is working well as identified through your visit and discussions with families and residents:

- We like EVERYTHING!
- Like being close to family. Very happy that my brother was able to move in with me
- Staff are wonderful and do their best
- There is no where else I would rather be
- We like it when the residents from Big River come to our home for games
- There are many youth volunteers
- Food is good and always plentiful
- Looking forward to the new fall menu with Ginger Beef stir Fry, and taco nights.
- Recreation Staff plan “Theme Nights” for us and those are fun i.e. Pub Night
- Staff and fellow residents are family!
- Enjoy our outings. Pie Social Outing is fun
- My mother is full care and is very well taken care of
- Staff are nice and respectful. So friendly and accommodating
- Back Patio is completed and a nice place to sit when weather cooperates

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Would really like to have a resident cat, or a pet of any kind
- Many animals visit but sadly none stay
- There is no maintenance person on site. Maintenance comes from Shellbrook
- We really have nothing to complain about! We are well cared for!



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Director Continuing Care North East for Prince Albert & Area, Darlene Batty; Director of Care, Peter Fair, and Executive Director of Continuing Care, Lisa Major to look at patterns of issues that may require follow-up
- Discussion of issues with the family or resident councils will occur. Escalation to leadership done as needed
- Feedback provided will be provided to leadership to help inform improvement efforts in Continuing Care

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Moose Mountain Lodge – 73535  
Community: Carlyle, SK  
Date of visit: August 26, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Danielle Benjamin	Community Health Services Manager
• Sheena Grimes	Director, Primary Health Care
• Amanda Watson	Director, Continuing Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- Old carpets removed in office areas and replaced with linoleum
- Some painting remains to be completed; however, most areas in the common area have been completed
- Daily Visual Management is occurring with contribution from all departments
- Attended Resident Family Council meeting with 17 resident/family present. The following was identified:
  - Continuing to work on temperature control in various areas of the building
  - A resident concerned with the isolation gowns being outside a door, it was a tripping hazard
  - Pub night planned
  - Summer activities included an outing to the Red Barn which was very much enjoyed
  - Laundry does a very good job although some items of clothing misplaced
  - Nursing care is excellent
  - Excellent food; doing a very good job. One preference for potatoes as opposed to macaroni
  - Appreciate the new staff
  - Request for more sports games on the large common TVs as that is very much enjoyed
  - Adult day program available for the community
  - Air conditioning hooked up into new wing this spring
  - Flooring at door jamb of tub room needs repair due to a tripping hazard for residents and staff
  - Flooring is pieced in several main traffic areas with raised joiners – there is risk of tripping

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Flooring in tub room is cracked and due to be replaced and is a safety hazard
- Flooring in main area is cracked and taped down and is also a safety hazard to residents and staff

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to offer the outings that are enjoyed by residents
- Continue to work with building services to ensure flooring repairs are made to improve safety
- Continue to complete the painting that is planned within the building

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Sunset Haven – 73534  
Community: Carnduff, SK  
Date of visit: September 4, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director Continuing Care
• Maggie Petryshyn	Executive Director Primary Health Care
• Amanda Watson	Director Continuing Care
• Sheena Grimes	Director Primary Health Care
• Linda Audette	Administrator
• Adeola Folorunso	Director of Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- Facebook page is going very and well received by families
- Continuing to accommodate bathing preferences as time allows
- Daily huddles occurring with all department staff
- Continue to work to accommodate meal and diet preferences – fresh fruit set out daily and available for residents as they wish
- Recreation makes effort to plan a variety of events including group and individual activities
- Adult day wellness programming available if required
- Town gifted the facility with the handi-van last year so this is used for outings and activities
- Resident noted how much she enjoyed the home and how well she was looked after – had no concerns or suggestions for improvement

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Opportunity for annual scheduled care conferences to be implemented
- Requirement and retention continues to be an ongoing concern



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to work to implement annual care conferences
- Continue to enhance activities and care routines to meet the needs and preferences of the residents

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Carrot River Health Centre - 73017  
Community: Carrot River  
Date of visit: August 23, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Andrew Will	VP, Infrastructure, Information and Support
• Karri Franklin	Director of Continuing Care, Tisdale and area
• Kathy Meyer	Facility Manager, Carrot River Health Centre
• Dennis Bryson	Manager, Support Services

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents were very happy with the new patio area that includes new stonework, sidewalk repair, barbeque and décor. The area is remarkable and was supported through community fundraising initiatives. Residents were appreciative of the care provided in the facility. Residents have access to activities, which they appreciate, and the day I was there, a number of the residents were out on an outing

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- There were no suggestions for improvement raised by the residents

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The facility is having some challenges recruiting and retaining staff. Kathy is engaging staff to implement a new staff mix into the rotation. There is a need to negotiate a new pharmacy contract for the facility

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Central Butte Regency Hospital - 73522  
Community: Central Butte, SK  
Date of visit: September 18, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Shelley Polos	Transition Lead, Primary Health Care
• Amanda Ennest	Unit Coordinator

Please describe what is working well as identified through your visit and discussions with families and residents:

- Good support from the nurse practitioner
- Care staff take time to talk with residents and really care about the residents and the community
- Recreation staff are very driven to find new activities including outings into the community
- Home supports an adult wellness program for the community
- Great support from the Auxiliary and Foundation
- Home has a family room that can be used at any time
- Partnership with the local school allows for pen pals
- Activities calendar posted in the main area with small calendars in each resident's room

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Opportunity to revitalize and renew the resident family council
- Opportunity to enhance the dining experience

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Work to revitalize the Resident and Family Council
- Look at ways to enhance the dining experience for residents



### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Coronach Health Centre - 73020  
Community: Coronach, SK  
Date of visit: October 2, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Dr. Kevin Wasko	Physician Executive, Integrated Rural Health
• Cara McDavid	Director, Primary Health Care
• Kelly Fish	Director, Continuing Care
• Dawn Gold	Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Private rooms with bathroom.
- Excellent food. “Christmas every day”. Would like more variety.
- Like the staff.

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- No visibility walls
- Poor quality food shipped to prepare (perogies)
- Drafty, cold room at end of hall
- Poor activity on weekend
- CCA/RN feel that workload is heavy on weekends. Is there opportunity for EMS?
- No ceiling lifts. No ceiling lift for tub room
- Tub in tub room old as building
- Staff want everyone to report to single manager
- Staff upset that home care can't help in facility

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Community Paramedicine
- Convalescent beds
- Opportunity to integrate public health
- Temporary recreation position
- Fundraising for new ambulance.
- 1 RN - 12 hr – 24/7 and 1 CCA – 12 hr – 24/7
- Head Cook challenge

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Craik & District Health Centre - 73021  
Community: Craik, SK  
Date of visit: October 1, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Jeannie Munro	Executive Director, Primary Health Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- A Resident/Family Council meeting was held the day of the visit with approximately eight residents and four family members
- General discussions regarding a dietary review and healthy choices was well received
- There were some concerns regarding the heating/cooling of the building with the changing season; however, this is being addressed
- There are resident conferences scheduled in October, which will include the physician, nurse and pharmacist
- Discussion regarding some summer coverage challenges related to maintenance and recreation, but no significant issues as a result of same
- Executive Director also spoke directly with a resident and family member and they stated their satisfaction with the facility, the staff and care that is given. The only concern had been the heating issue most recently
- Manager input – having the Nurse B is very beneficial in ensuring support for nursing staff and support for implementation/oversight of nursing practice
- On site Primary Health Care clinic with physician/nurse practitioner is an asset to the community

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Meeting with Manager – recruitment/retention can be challenging; summer coverage as identified
- Heating issue but now resolved (older building)
- No other significant concerns or issues identified

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- There will be continued review and focus on Long Term Care Quality Improvement Indicator results and development of action plans to address any issues
- Visibility walls/huddles will be used to keep staff informed of both Saskatchewan Health Authority and site specific targets, measures and areas for improvement
- Continue with Resident/Family Councils to keep the voice of the resident/family at the forefront

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name of and number facility: Cudworth Nursing Home & Community Centre - 73753  
Community: Cudworth, SK  
Date of visit: October 24, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- Lisa Major Executive Director Continuing Care North East
- Monica Slobodzian Administrative Assistant, Executive Director
- Three Residents
- One Family Members

Please describe what is working well as identified through your visit and discussions with families and residents:

- “I like Beer; hate men!” Father and Brothers are okay
- Food is plentiful
- Staff are all very kind
- I like my room a lot. I had a choice between this one and another one; this one is bigger
- We get up when we want and go to bed when we want
- Cannot think of a single thing that could make living here better
- Never bored.
- Activities and entertainment are good. “Enough for me!”
- Many outings.
- Once a week baths are all right
- Transition from own independence to Home was difficult but staff have been great with it. This Home was resident’s first choice, which made transition easier

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Would like to see more variety with food, different choices
- Food is mediocre
- Would like at least 2-3 baths a week. A shower would be nice
- Home gets quite cold. Home’s temperature is kept to where the staff like it, not the residents



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Director Continuing Care North East for Melfort & Area, Sandy Weseen, Facility Administrator, Corinne Slobodian; and Executive Director of Continuing Care, Lisa Major to look at patterns of issues that may require follow-up
- Discussion of issues with the family or resident councils will occur. Escalation to leadership done as needed
- Feedback provided will be provided to leadership to help inform improvement efforts in Continuing Care

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Cupar & District Nursing Home - 73783  
 Community: Cupar, SK  
 Date of visit: July 24, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Sharon Garratt	VP Integrated Urban Health & Chief Nursing Officer
• Richard Jenzen	Administrator, Cupar & District Nursing Home
• Cathy Peters	Director of Care, Cupar & District Nursing Home
• Attended annual resident and family BBQ with ~180 residents, family, staff and board members	

Please describe what is working well as identified through your visit and discussions with families and residents:

- All of the rooms in this facility are single rooms with bathroom
- The local board and community are very supportive and are doing a good job of upkeep on the facilities as well as fundraising for a number of amenities such as:
  - Outdoor patio area with safe walk and new gazebo to provide shade and protection from wind and bugs
  - Adjustable tables in the dining room
  - Conversion to wireless phones (without support from SHA and ongoing software licensure and tech support)
  - Air conditioning
  - Kitchen renovation with change to all stainless steel
- The evening recreation program continues to be well-received by residents
- Physician from Stapleford Clinic in Regina visits weekly and the Resident Care Coordinator calls family with update each time the physician sees a resident
- Residents and families consistently expressed appreciation for the care received by the care team. They enjoy the food and appreciate the activities
- There is a very engaged Resident and Family Council

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Resident and family experience surveys were completed in 2019, but results not yet received by the facility. They will review them with their Resident and Family Council and make appropriate plans to respond once received

- They have a number of challenges keeping continuing care aides, cooks and nursing positions filled. Scheduling is very challenging particularly nights. They identified a need for additional nursing resources to support the needs of the residents
- In spite of good work at upkeep, the facility still has infrastructure challenges and requires electrical and window upgrades
- Capital equipment needs include new beds and additional overhead lifts. They acknowledged the need to be coordinated with SHA to gain full benefits of group purchases
- As a facility with all single rooms, they are admitting residents who require their own room due to responsive behaviors. They have two residents currently on the wait list for the Geriatric Services Team to assess and provide advice on how to manage their behaviors
- Occupational therapy/physio therapy services are very scarce and are accessed through Primary Health Care

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- There is a Primary Care Clinic attached to the nursing home where residents can receive blood work. Primary Care is provided by a visiting nurse practitioner who does not play any role in the care of the residents. The administrative team at the home believes there would be value if the nurse practitioner could be involved with the residents. There is potential for the facilities in the home to be accessed by individuals living in the community, for example tub baths for home care clients on weekends or evenings. The Director of Care was encouraged to discuss these ideas with the Primary Health Care director
- Information on staffing resources will be considered within the work being completed by of the SHA and Affiliates Steering Committee overseeing the development of the Principles and Services Agreement template

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Cut Knife Health Complex - 73024  
Community: Cut Knife, SK  
Date of visit: June 11, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Alex Miller	Facility Manager
• Christine Stapley	Recreation Coordinator
• Karen Kindrachuk	Meaningful Life Specialist
• Neal Sylvestre	Executive Director of Continuing Care North West
• Eight Residents	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Repairs on roof completed
- Homemade desserts are now on the menu
- Fresh fruit now added to menu
- Residents appreciate Recreation Events – Family Fun Day and ability to participate in community events – Reconciliation Gathering
- Purposeful Rounding continues
- Facility Manager facilitated smudging ceremony for one of the residents in April

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Would like to see wheel chair door for courtyard
- Area in dining room requires a second coat of paint
- Too many green beans
- Family concern there is no staff presence right after suppertime
- Front entrance needs new lighting –difficult to see when dark

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Executive Director of Continuing Care will work in collaboration with other Executive Directors of Continuing Care within SHA to look for issue patterns that may require follow-up across the province



- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue working with families and residents to make improvements. Any significant concerns identified through the tour will be addressed immediately
- In regards to wheelchair door, Executive Director of Continuing Care identified that expenditures under \$50K are to be looked at for approval within the next month. They should hear back by July/August 2019
- Utility Worker will paint second coat on rainy days
- Facility manager is implementing staggered breaks to increase presence after supper

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Spruce Manor Special Care Home - 73797  
 Community: Dalmeny, SK  
 Date of visit: October 2, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Dalene Newton	Executive Director, Continuing Care – Saskatoon Urban
• Andre Moss	Director, Continuing Care 2 – Saskatoon Urban
• Bev Dawson	Administrator
• 29(1)	Board Member
• Kimberly Yelland	Administrative Assistant, Executive Director

Please describe what is working well as identified through your visit and discussions with families and residents:

- Spruce Manor Special Care Home is located in Dalmeny, SK. Due to its rural setting there is a strong sense of community
- The resident rooms are a nice size. All 36 rooms are private and have their own bathrooms
- They received a new bus through fundraising from the Town of Dalmeny. This allows residents to participate in outings. The home plans many excursions including, Combine Chasing, the Enchanted Forest, the Berry Barn, Railway Museum, as well as going out for lunch at their favorite restaurants
- The Resident and Family Experience Survey results were very high this year. With the consensus being that Spruce Manor is a caring and friendly atmosphere where the staff genuinely cares about the residents
- There is low staff turnover, with many staff having been here for several years
- We were able to speak to a resident who loves the activities the home offers and thinks the food is very good
- There is a Saskatchewan Roughrider Room where residents and families can watch the games. The room includes a large TV, couches, and a large mural of Taylor Field
- They have a large activity room with lots of books. There is also a courtyard off the activity room with a large gazebo for residents to enjoy
- They recently renovated a meeting area for families and residents to visit

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- The development and future implementation of the Administration Information Management System (AIMS) has been difficult to fully understand what is offered through this program and how to access it
- Spruce Manor is planning on expanding. They want to add a second floor to provide personal care. This addition would mean expanding the kitchen and the dining room space that it also used for long-term care

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Spruce Manor in Dalmeny is an affiliated home; they have a contract with the SHA to provide care and service to residents
- The administration of the Spruce Manor Special Care Home is a very good partner with the SHA and they are proud to provide excellent care to residents
- Discussion occurred regarding the plans to increase their business model with supported living. This will impact the long-term care home space and therefore, will require additional discussion with the SHA

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Davidson & District Health Centre - 73026  
Community: Davidson, SK  
Date of visit: October 1, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- Jeannie Munro Executive Director, Primary Health Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- There was no Resident/Family Council this day so the writer met with a resident and two family members. The following is their feedback:
  - Staff are friendly and professional
  - Facility is clean and 'well-cared for'
  - The resident room is spacious and adequate
  - Activities offered are satisfactory, although it is difficult to find something suitable to match the various abilities of the residents. This particular resident is physically well and mobile, so he prefers more active things to do and likes to be outside. He helps maintenance with small jobs if able
  - The meals are good and enough variety and quantity

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- This resident and family had no specific areas of concerns or areas for improvement. The only comment around improvement was having sufficient activities to keep their loved one busy and engaged

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- There will be continued review and focus on Long-Term Care Quality Improvement Indicator results and development of action plans to address any issues
- Visibility walls/huddles will be used to keep staff informed of both SHA and site specific targets, measures and areas for improvement
- Continue with Resident/Family Councils to keep the voice of the resident/family at the forefront

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Dinsmore Health Care Centre - 73028  
Community: Dinsmore, SK  
Date of visit: October 21, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- Jeannie Munro Executive Director, Primary Health Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- There was no Resident/Family Council this day so the writer met with a resident and family member. The following is the family member's feedback:
  - Staff are friendly
  - Admission and getting resident settled was quite smooth (resident in longer-term care for approximately one year)
  - Facility is clean and grounds maintained
  - Meals are very good and quantity adequate
  - Activities are varied and provide options for the residents

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- This family member had no specific areas of concerns or areas for improvement
- Manager identified similar to other small, rural sites – recruitment and retention of staff can be a challenge

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- There will be review and focus on Long-Term Care Quality Improvement Indicator results and development of action plans to address any issues
- Visibility walls/huddles will be used to keep staff informed of both SHA and site specific targets, measures and areas for improvement
- Continue with Resident/Family Councils to keep the voice of the resident/family at the forefront

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Goodwill Manor - 73751  
 Community: Duck Lake, SK  
 Date of visit: October 8, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Lisa Major	Executive Director Continuing Care North East
• Brad Havervold	Executive Director, Community Care Branch, MoH
• Cheryl Prediger	Director of Care
• 29(1)	Board Chair
• 29(1)	Board Member
• Two Family Members	
• One Resident	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Good care
- Residents are happy
- The staff foresee and plan everything
- Resident's health has improved since moving to Goodwill Manor
- Residents are kept clean
- Residents get to keep active
- What is bored? Nothing is boring...I've never been bored a day on my life!"
- Everyone works towards the goal of keeping people in a "home" setting
- Meals are good
- Located close to home
- Lots of company can visit
- Able to do things I enjoy
- Food is good most of the time. The cook works with residents to supply an alternative to the main meal
- I get to choose what I do in a day
- I can get up when I want
- Great to have the Doctor and Occupational Therapist come to Goodwill Manor
- The van provides opportunity for recreational outings (casino, shopping, etc.) and is accessible for residents to schedule to take to appointments
- There is a real sense of community

- The staff are from the community; therefore, most know the residents and their families from before they lived here
- With small staff numbers they feel more accountable to each other
- They know if they call in for a shift, there is a chance their co-workers may have to work short
- Feel comfortable being able to talk to staff and Cheryl with any concerns that come up
- I work at a different care home but choose to keep my mom living at Goodwill Manor
- Would like to build relationships with community partners
- Being able to stay in Duck Lake
- I always knew if I ended up in long term care that I would want to stay in Duck Lake
- The staff and management really think things through. They can foresee things that may happen and make a plan on how to deal with it
- Everyone works for a common goal
- Great Care. Concern raised that adequate funding continues for great care
- Home like atmosphere
- Able to talk to Cheryl, the Board, <sup>29(1)</sup> anytime. Open door policy with Cheryl
- There is enough REC here. I am never bored

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Only one Recreation person. This is all that the budget permits
- Always room for improvement
- Sufficient funds needed to keep these small facilities operating
- Do not bury the managers in Bureaucratic Policies. Keep the “heart” of the facility
- My nails are being clipped too short and fingers bleeding
- Adaptive clothing is being ripped.
- Pulling button up shirts off without undoing the buttons
- There does not seem to be much common sense
- Are the staff rushed or are they rushing themselves?
- Concerns that every item that is added to the staff “duties” (i.e. answering the door) will make the staff even more over worked.
- My dad was put in his wheelchair and was positioned in a way that you could not see his left arm. It looked externally rotated. He was sitting on his hand and was unable to verbalize for himself
- More staff is needed
- The noise of the nurse call system is disruptive and wakes the residents up
- There are not enough ceiling track lifts. Older homes need renovations done before they can be installed
- Getting assessed by Home Care is an obstacle
  - Family made an appointment with Home Care to have mother assessed
  - Family was advised that mom does not qualify

- Daughter works in LTC
- Mom was mixed up, incontinent and forgetful
  - Home Care said that she falls in the cracks of the system
  - Mom was able to get into Respite at Goodwill Manor (two months)
  - Cheryl requested that mom be re-assessed while in Respite
- Cheryl contacted Rosthern Home Care for assessment
- Rosthern Home Care phoned daughter and questioned her why she needs a 2<sup>nd</sup> assessment and advised daughter that they would not phone Cheryl
- Daughter felt like she was a bother to Home Care
- Some assessment questions need to be changed or re-worded. They do not address the unique issues with a person with Dementia
- Staff have changed.
  - They no longer do little extras for the residents and staff no longer go “above and beyond”
- Staff recruitment and retention is a challenge.
- Cooks needing red seal?
  - The standard is so high, creating a struggle to recruit and retain
  - What do you do without a cook?
  - Food is a big part of the residents’ life and residents look forward to meals
- There is a feeling that, perhaps if we keep looking like we are doing well and “sacrifice” stuff, we are just hurting ourselves, if we look like we are doing fine then we won’t get any help?
- There needs to be more supports in place for end of life care
- Worried that staff / management is going to be buried in bureaucracy
- Make the Resident Family Council meeting less formal
  - At BBQs?
  - At Christmas Party?
  - Maybe quarterly and then maybe you would get better attendance

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Director Continuing Care North East for Melfort & Area, Sandy Weseen; Director of Care, Cheryl Prediger, and Executive Director of Continuing Care, Lisa Major to look at patterns of issues that may require follow-up
- Discussion of issues with the family or resident councils will occur. Escalation to leadership done as needed
- Feedback provided will be provided to leadership to help inform improvement efforts in Continuing Care



### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Wolf Willow Health Centre - 73511  
Community: Eastend, SK  
Date of visit: October 29, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Brenda Schwan	Executive Director, Primary Health Care, Integrated Rural Health
• Dennette Warberg	Manager, Herbert & District Integrated Health Care Facility

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents and families are enjoying the new “resident kitchen”
- Families feel they know about their loved ones’ care through medication review meetings, family conferences and monthly calls
- The weekly art therapy program is amazing; at 29(1) a resident discovered she is an artist!

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- No suggestions for improvements in the facility on this visit

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- This facility has really tried to focus on the resident as the centre of everything that they do:  
Resident first

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Lady Minto Health Care Centre - 73033  
 Community: Edam, SK  
 Date of visit: August 14, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Karen Kindrachuk	Meaningful Life Specialist
• Clint Macnab	Facility Manager
• Chris Thiele	Director of Continuing Care
• Lisa McGillivray	Director of Primary Care
• Neal Sylvestre	Executive Director of Continuing Care North West
• Sheri Marciniuk	Dietary
• Fourteen Residents	
• Three Department Staff	
• One Family Member	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Roof leaking in dining room completed June 2019
- Implement more raw veggies
- Meals are good
- Housekeeping and Laundry is going well
- Precision Auto Door to be installed for access to patio
- Summer Utility Worker does a beautiful job in maintaining the grounds
- Appreciation of outings at Manor located next door for shared functions i.e. Mother's Day Tea
- Appreciation of outings via Handivan
- Purposeful Rounding continues

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Automatic doors to back patio area – on Capital Maintenance Plan
- Food portions are too large
- Too many instant puddings and canned fruit
- Room temperatures are a concern
- Master Rotation for Resident & Family Council meetings
- Attention to purposeful Rounding



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Executive Director of Continuing Care will work in collaboration with other Executive Directors of Continuing Care within SHA to look for patterns of issues that may require follow-up across the province
- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue working with families and residents to make improvements
- Sheri Marciniuk in attendance to address food related concerns. Follow up with Maintenance regarding room temperatures.

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Elrose Health Centre - 73034  
Community: Elrose, SK  
Date of visit: October 1, 2019

Please indicate who attended this visit:

(Name)	(Title)
<ul style="list-style-type: none"><li>Erin Hess</li></ul>	Care Team Manager
<ul style="list-style-type: none"><li>Gayle Riendeau</li></ul>	Executive Director Acute Care Integrated Rural Health South West

Please describe what is working well as identified through your visit and discussions with families and residents:

- Activities
- Relaxed Breakfast
- Clean Facility
- New whiteboards in rooms, starting new “All About Me” Boards (Patient Family Centred Care) and Purposeful Interactions

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Drink choices at table vs. pre-poured (as per survey results and changes already underway)

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Daily visual management huddles with team, daily
- Care Team manager currently contacting each resident’s family monthly to discuss client’s care and any concerns. Family is appreciative
- Staffing realignment (days continuing care aides to evenings)

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Centennial Special Care Home - 73778  
 Community: Esterhazy, SK  
 Date of visit: August 22, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Karen Earnshaw	Vice President, Integrated Rural Health
• Tammy Wolfe	Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- 53 bed care home, Adult Day Program, Resident Council meets monthly
- 12 hr Licensed nurse days; 12 hr Licensed nurse nights; 8 hr licensed nurse 7 days; no Nurse B; 6 CCAs 8 hr days; 3 CCAs am/4 CCAs pm –28 hr Activity/5 days week (looking to change hours and rotation to increase coverage); EMS support for IV starts for therapy
- Huddle 07:00 daily to address today's work and work short if needed
- Difficult to recruit in all departments and use overtime when needed
- Good team work to manage daily care
- Ceiling track lifts but not in all rooms
- Some strong fundraising but cautious spending as community wants to save for new building
- Relaxed breakfast - choice at breakfast but still receive meals pre-plated
- Access to courtyard is secured but through report room
- Met with two residents
  - Living there for four years – very good, no issues, have choices, food is good, privacy is respected and there are things to do
  - Living there for two years – Initially just home care, very satisfied, staff really care, family is welcome, opportunities to go out, will use van for appointments if family not available, comfortable, can ask for things

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Quarterly Med reviews – pharmacist attends but struggle to agree on urgency to fill new/change
- Use GRIT resources, MDS support is an issue
- Nurse call system needs repair/replacement
- Need replacement beds, especially low rise
- Two different sized rooms, some washrooms too small, lifts are aging
- Shared washrooms in almost half of building, tub rooms old, both functioning



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Have engaged partners to Improve access to Wi-Fi
- No family-setting space, will work with local auxiliary on ideas
- Re-working schedules to provide activity on weekends

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Estevan Regional Nursing Home - 73533  
Community: Estevan, SK  
Date of visit: September 26, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Scott Livingstone	Chief Executive Officer
• Amanda Watson	Director, Continuing Care South East
• Christine Stephany	Nurse Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Facility is clean. Hallways are fairly clear and uncluttered
- Residents highlighted multiple times that care was excellent
- Resident Family Council very strong and collaborative

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Working on mattress replacement strategy –Residents concerned about quality of mattresses
- Food is provided by St. Joseph’s Hospital – lots of concerns about quality of meals and menu consistency – ability to get snacks facilitated out of St. Joseph’s. No major complaints on food inside facility; seeing more variety in menu
- Working to make things more visible (Daily Visual Management) should also include safety huddles
- Need to ensure rooms are properly remediated prior to resident change (paint, wall patching etc.)
- Concerns raised about having a shelter for smoking
- Older style of facility brings challenges to common spaces and maintaining cluster free areas for staff to provide care and resident activities



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Staff and leadership commitment to continuous quality improvement and alignment of strategy is evident
- Continue to make capital and operating needs known
- Very active Patient and Family Council with very good family representation



## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: St. Joseph's Hospital LTC - 73036  
Community: Estevan, SK  
Date of visit: September 26, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Scott Livingstone	Chief Executive Officer
• Tara Daoust	Facility Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Facility is clean and well maintained. Hallways are fairly clear and uncluttered
- Monthly Activity Calendar appreciated by residents
- Resident requests and concerns are responded to quickly. Strong Resident Council
- Resident - Care is excellent!

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Working on mattress replacement
- Food is provided to other facilities out of St. Joseph's Hospital – no major complaints on food inside facility. Seeing more variety in menu
- Working to make things more visible (Daily Visual Management) should include safety huddles

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Staff and leadership commitment to continuous quality improvement and alignment of strategy is evident
- Continue to make capital and operating needs known

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Eston Health Centre - 73037  
Community: Eston, SK  
Date of visit: September 16, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Jeannie Munro	Executive Director, Primary Health Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- The writer attended a Resident/Family Council meeting
  - They commented positively about the activities and BBQs throughout the summer; fresh fruit and salads; flexibility with access to kitchen/meals as needed
  - No housekeeping concerns
  - No concerns related to laundry but stated the odd item gets mixed up or is sent to Central Linen
  - Enjoy the outdoor space; garden planters appreciated and enjoyed by all
  - Other activities appreciated
- Manager talked about working with Administrative staff and cross-training for the facility and Primary Health Care Clinic, which is positive and provides better coverage

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Resident/Family Council meeting - there was a specific resident who commented on the access/availability of soft-cooked eggs; this has been reviewed by Public Health in other facilities and due to potential health concerns in undercooked foods, soft-cooked eggs are not to be offered. This particular resident is upset with that. There will be more follow up with Public Health and Nutrition/Food Services
- Manager – identified gaps/challenges related to CLXT recruitment/retention

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- There will be continued review and focus on Long-Term Care Quality Improvement Indicator results and development of action plans to address any issues
- There will be review of any resident/client safety incidents and improvement strategies developed
- Continue with Resident/Family Councils to keep the voice of the resident/family at the forefront

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Fillmore Health Centre - 73040  
Community: Fillmore, SK  
Date of visit: September 6, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Linda Wilson	Director of Client Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- Relaxed breakfast is implemented to suit the needs of the residents
- Breakfast club is very popular with the residents
- Home has a handi-van and there are a lot of summer outings; ice cream, crop seeing, wiener roasts, BBQ's
- This past winter, Stoughton and Fillmore challenged each other for a crokinole tournament; the residents have continued and this winter plans for a floor curling tournament are underway
- Had a summer menu implemented and really found that was a good change
- School kids come seasonally to participate in resident activities
- There is a visiting dog that attends work with a worker and this is very much enjoyed by residents
- Great staff that are invested in the residents
- Strong palliative care program
- Hairdressing services once a week
- Resident Family Council meetings are held monthly
- Great support from local auxiliary with fundraising
- Beautiful enclosed courtyard that is used frequently

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Recruitment and retention is an ongoing challenge
- Opportunity to improve regular care conferencing
- Plug ins in the kitchen are not on back-up power



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Review the kitchen electrical for connection to back up power
- Work to improve regular care conferencing

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Foam Lake Jubilee Home – 73786  
Community: Foam Lake, SK  
Date of visit: July 16, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Renee Popowich	Health Services Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Flexible breakfast continues through the morning
- Dry ribs and french fries added to menu at the request of the residents
- Shower available and being used by some residents
- Resident gazebo area currently under renovation; support of foundation
- Painted exterior wood panels and doors
- Maintaining 5S and Kanban
- Daily Visual Management schedule of daily huddles occurring – two times a week with everyone/other departments other days
- Picture frames outside doors with residents' information
- Rooms are personalized
- Some interior painting occurring on door frames and touch ups of chips this is much appreciated
- Nine new mattresses this past year
- Swing set and play area for kids installed in courtyard area for visitors
- Small enclosed outdoor area with BBQ for family functions
- Awning for patio area which provides sun protection
- Flower and vegetable beds
- More Kanban completed for main storage

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Two tub rooms but only one functioning tub
- Esthetic painting could improve the look



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to work on improving the esthetics of the home
- Additional tub would be a benefit
- Continue with menu and care improvements.

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Echo Lodge - 73782  
Community: Fort Qu'Appelle, SK  
Date of visit: August 8, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Sandra Barrie	Facility Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- In process of changing over medication delivery system to improve safety and reduce risk
- Worked hard on menu changes over the year
- Working on enhanced activities for residents and more one-to-one activities
- Enhanced Gentle Persuasive Approach (GPA) training for all staff
- Working on improvements to the concrete in the courtyard
- Resident/staff input on the wings to create a home-like atmosphere
- Working on paint renewal in hallways and public areas
- "Mural" project underway for art on the walls as an alternative to paper/posters
- New tub installed this past year with second tub ordered
- Electronic visibility wall is being utilized
- Mural wraps on exits has deferred exit seeks and been effective
- Going to be implementing relaxed breakfast
- Garden boxes being used

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Family/resident feedback included ongoing concerns about the poor temperature control in the home in the summer, including a lack of a contingency plan for the very hot summer days
- Air conditioning is an ongoing concern – humidity is high resulting in modified care processes
- There is a need for attention to preventative maintenance within the kitchen area as well as the dining room flooring that is discolored and peeling
- Value in adding ceiling track lifts into older wings as it has smaller rooms and doorway



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Address the indoor temperature including the air conditioning
- Review the preventative maintenance within the building
- Continue to work on the quality projects that are underway



## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Gainsborough Health Centre - 73044  
Community: Gainsborough, SK  
Date of visit: September 4, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Maggie Petrychyn	Executive Director, Primary Health Care
• Amanda Watson	Director, Continuing Care
• Sheena Grimes	Director, Primary Health Care
• Donna Davis	Community Health Services Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Relaxed breakfast continues as well as use of a Suzy-Q cart for lunch; implemented choice of juice
- Annual care conferences are being worked on and enhanced
- Recreation tours on weekends has enhanced the quality of life of residents
- Daily huddles held with all departments with safety addressed daily
- Resident Family Council Meetings held every 2<sup>nd</sup> month
- Very proud of the care that is provided
- New windows installed this past year
- Fenced, secure outdoor courtyard is frequently utilized
- Raised vegetable beds planted and harvested by residents
- Residents enjoy the solarium set up off dining room for sunshine in the winter; fireplace has been purchased for this area to make it a cozy environment for winter

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Recruitment and retention continue to be a challenge
- Temperature control is a concern for residents as it has been cold in the home in the summer
- Ongoing work required with food choices and menu planning for residents



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to work on improving care conferences
- Continue with enhancing dining, menu and food choices
- Work to adjust temperature to meet the needs of the residents

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: L. Gervais Memorial Health Centre - 73045  
 Community: Goodsoil  
 Date of visit: April 15, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Kelly Lyon	Facility Manager
• Chelsea Hofer	Recreation Staff
• Karen Kindrachuk	Meaningful Life Specialist
• Chris Thiele	Director of CC NW
• Neal Sylvestre	ED of Continuing Care North West
• 10 Residents	
• 1 Family Member	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Cream soups, chicken wings, garlic ribs now on the menu
- Resident enjoy bologna sandwiches and Friday lunch BBQs
- Purposeful Rounding continues
- Enjoyed visit from “Elvis”
- Residents appreciate Rec Activities i.e. wiener roasts, ice cream, lake outings

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Driveway needs grading
- A former resident family member had significant concerns with respect to the care provided. The outcome of those concerns are still under evaluations with the provincial ombudsman

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- ED of Continuing Care will work in collaboration with other ED of CC’s within SHA to look for issue patterns that may require follow-up across the province
- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue



working with families and residents to make improvements. Any significant concerns identified through the tour will be addressed immediately

- Maintenance manager to address driveway grading issue

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: St. Joseph's Hospital/Foyer d'Youville - 73046  
Community: Gravelbourg, SK  
Date of visit: September 25, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Beth Vachon	VP, Quality, Safety & Strategy
• Kelly Fish	Director, Continuing Care
• Desiree Brisebois	Facility Manager
• James Hobday	Manager, Support Services

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents describe staff as caring, respectful and kind. For the most part the food is good and some felt there was too much food offered. Laundry is well done and personal belongings are well taken care of. Residents know they can talk to Desiree if they want to discuss anything and she will act on their suggestions and concerns. The facility is clean, bright and very well maintained

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Residents did not identify any areas of improvement

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- There has been significant work done in this home to reduce responsive behaviors while decreasing anti-psychotic use. The staff refer to the behavioral consultant when required to assist in care planning
- The team is also focusing on safety and the reduction of staff injuries. A Safety Management System has been implemented and through this, there has been an identification of areas to improve safety

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Gull Lake Special Care Centre - 73048  
Community: Gull Lake, SK  
Date of visit: August 13, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- Larissa Gader Health Services Manager
- Beth Vachon VP, Quality, Safety & Strategy

Please describe what is working well as identified through your visit and discussions with families and residents:

- A number of residents state they are happy in this home. They report satisfaction with the care and how staff treat them. There are a number of activities that take place in this home.

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- One individual said he had problems with one staff member but that it was resolved when he spoke to the manager
- Some comments about the quality of food and menu variety

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- I would suggest ongoing evaluation of the menu and continued assessment of personal activity plans

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Hafford Special Care Centre - 73050  
Community: Hafford, SK  
Date of visit: August 22, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Doreen Madwid	Facility Manager
• Jaclyn Young	Recreation Staff
• Deanna Miller	Director of Continuing Care North West
• Neal Sylvestre	Executive Director of Continuing Care North West
• Twelve Residents	
• One Family Member	

Please describe what is working well as identified through your visit and discussions with families and residents:

- New TV
- Rec supporting SaskTel Wi-Fi for residents
- Purposeful Rounding continues
- Rec program active – BBQ, pizza parties and outings
- Youth volunteers support the program
- Handivan – Two wheelchairs

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Residents wanting fish on Fridays –previously mentioned and no change
- Response to call bells – takes time to respond
- Room window has a leak – needs replacement
- Hallways are cluttered with equipment
- GPA only once – no recertification
- Wood burning fireplace has been decommissioned, waiting for gas insert replacement

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Executive Director of Continuing Care will work in collaboration with other Executive Directors of Continuing Care within SHA to look for issue patterns that may require follow-up across the province
- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue working with families and residents to make improvements. Any significant concerns identified through the tour will be addressed immediately
- Recertification in GPA for front line staff will be addressed. Executive Director of Continuing Care North West will follow up with IT on the availability of Wi-Fi for residents



### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Herbert & District Integrated Health Care Facility - 73504  
Community: Herbert, SK  
Date of visit: October 3, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Brenda Schwan	Executive Director, Primary Health Care, Integrated Rural Health
• Kelly Fish	Director, Continuing Care, Integrated Rural Health
• Morgan Montgomery	Manager, Herbert & District Integrated Health Care Facility

Please describe what is working well as identified through your visit and discussions with families and residents:

- Families really like the “well wishes”
- Families are overall pleased with the care
- Everyone enjoys the renovated entrance area
- Residents really enjoy the art activities and display area

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Residents would like more food choices
- Residents would like the choice to sleep in and have a variable breakfast

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Emphasis on a resident centered model of care in Long Term Care

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Hudson Bay Health Care Facility - 73764  
Community: Hudson Bay, SK  
Date of visit: October 16, 2019  
Please indicate who attended this visit:

(Name)	(Title)
<ul style="list-style-type: none"><li>• Pam McKay</li><li>• Four Residents</li><li>• Six Family Members</li></ul>	Executive Director, Primary Health Care North East

Please describe what is working well as identified through your visit and discussions with families and residents:

- Wonderful staff, caring, excellent workers. Good at adding the small touches that mean a lot to residents and family i.e. putting on jewelry
- Residents get to make decisions about when they want to get up and go to bed: resident comment: “No one has told me to go to bed yet”
- Management and nursing good at notify family of any issues or medication changes
- Staff are approachable and good to discuss options with family
- Activity Workers do a great job!
- Both residents and family are very appreciative of the activities that are provided seven days a week
- Families feel better knowing that there are activities occurring if they cannot visit
- It helps knowing their family member, if they want, will be out of their room and have the opportunity to socialize
- Resident comment: Lots to do if you are interested
- Resident Family Council allows for participation in decision making around fund raising, activities, meals etc.
- Food is very good; home cooked meals
- At the resident family council meeting, the residents get to choose the menu for one of the meals
- Laundry is good, no problems
- Homey feel to the building, good smells from the kitchen, well cared for

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Family feel staffing is a little short especially around supertime and bath days
- Residents are a little hesitant to ask for help because the staff are busy
- Catheter bags should be emptied on a regular basis
- Staff should ensure that dentures are in place before meal starts and glasses, hearing aides are on for the day
- Provide residents with the opportunity to choose the cloths they want to wear for the day if they have the capacity to do so
- Noticed on occasion residents are slumped in their chairs, if this is happening staff should reposition them right away
- Would be nice if the rooms could be a little larger especially for those that have hobbies etc.
- Consistency when placing people in LTC. There is confusion around the waitlist and concerns that some have jumped ahead of others
  - Families would be more understanding of these deviations if there was more information provided. Would like a single point where they can go to get information/answers once their family member is in the list and waiting for placement
- Mending is being done by volunteers. If a volunteer doesn't come in for some time, the residents are missing clothes. If the laundry staff have capacity, could they do mending if time permits? Suggested by the family that they had heard this was outside the Laundry job description
- Often Residents lose or break eyeglasses, dentures and hearing aids, all very important in resident health and wellbeing. These items are expensive and after time may not be replaced because of cost. Is there some way or insurance plan that could help families manage these expenses?
- Families asking to have the standard LTC charge for lotions/shampoo etc. removed if they are willing to purchase the items on the list for their family members

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Staffing – will look at job routines and see if efficiencies can be made during the times such as meal times and specifically at supper time
- Catheter care – individual care plans will be updated and reflect the need to catheter care checks and urine bags to be checked and emptied four times per day. Care plans in each resident room will reflect this improvement so all employees aware of change and

families are aware of the addition to the plan as well. During family/resident meetings that are held yearly, this will be added to the discussion.

- Personal items – hearing aids, dentures and glasses are to be checked and resident assisted with making sure they are on the resident before leaving their rooms. This is a part of their individual care plans already but will ensure it is reviewed with all employees and reflected on the care plans in each resident's room. Families will see it is part of the care plan. The residents will have a choice of the clothing they want to wear for the day. This will also be communicated to all the employees. This is part of the individual care plans on the wall in each resident's room and will be updated. This will be part of the recertification of GPA this fall. The 4 "P's" which includes personal products within reach and on the resident if the residents wish them on
- Positioning – every hour each resident is checked for the 4 "P's" as according to Purposeful hourly rounding. This includes positioning and personal belongings such as glasses. This will be reinforced to all employees and will be enforced during the GPA recertification for all the continuing care aides this year.
- Laundry – this will be discussed with the Director of Continuing Care for our Network to see if in fact the laundry employee is allowed to do minor mending or if we need to always depend on our volunteers
- Communication – related to the Access Review Committee (ARC) and placement and returning to the resident's community. This has been passed on to the Director, Karri Franklin, to be discussed in the North East. The families hear about a "list" but there is no list so to speak. This is not shared with the families due to confidentiality but the families still want to be updated to how long it will take to come back home for their loved ones. This is a bigger picture provincially and one that the Directors and the ARC committees need to discuss. The families deserve to be informed on the process and consistent language that everyone is using. Part of the problem is the consistent language and this has to be explained at the very beginning of the process
- Financial – insurance for lost or broken personal items such as glasses, dentures or hearing aids. There was discussion about a "Tenant Package" that the families could purchase themselves to cover these incidents that can and have occurred. I spoke with the Director of our Network and families can purchase their own insurance policies if they choose. This needs to be communicated to the families on admission so everyone is aware that these items are not covered or replaced by the facilities themselves. Again, proper communication right from the beginning is important so that all residents and families are aware of the processes and so that everyone is using the same language so there is no confusion. Provincially, this needs to be the same as well so everyone is following the same scripts and processes

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: St Mary's Villa - 73793  
Community: Humboldt, SK  
Date of visit: July 12, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Dr. Susan Shaw	Chief Medical Officer
• Maily Lockhart	Executive Assistant, Chief Medical Officer
•	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Small but effective and engaged Resident and Family Council leadership partnering with management to improve care and experience
- Staff are welcoming and engaged
- Residents report they feel well cared for and feel like they are in their home
- Visible and appreciated support from Director to facility manager who has a staff of approximately 200 caring for 85 residents
- Partnerships with community health care professionals (dentistry) to enhance services for residents with progress made on renovations
- St Mary's Villa Foundation actively raises funds to support care initiatives aligned with the needs of the residents and facility

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Aging building (1963) with infrastructure creates significant challenges and restrictions on model of care
- Small and outdated rooms which create challenges for residents and staff
- Opportunity to increase use of visual management throughout the facility and team.

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The information gathered from the visit will be shared with the executive director and directors responsible for the home.
- Better understanding of the commitment of our staff and the challenges our facilities create for residents and staff
- Consideration of further expansion of Patient and Family Centred Care supports to LTC teams

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: St. Joseph's Health Centre - 73056  
 Community: Île-à-la-Crosse, SK  
 Date of visit: August 23, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Andrew McLetchie	VP, Integrated Northern Health
• Sharon Kimberly	Site Manager, Île-à-la-Crosse
• Richard Petit	Executive Director, Primary Health Care North West
• North West Resident Life Coordinator	
• Recreation worker, Ile a la Crosse	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Appreciation of work to provide local food. Local fish fry and wild meat are appreciated by the residents. Work being done to personalize resident meals
- Use of bread maker and griddle in long-term care area improving sensory experience of residents
- Laundry labeling improving management of residents clothing
- Cleanliness of residence appreciated
- Replacement Call bell to be installed in September, which will help with responsiveness in care
- Rounding with physicians regularly done and supportive of residents and teams
- Recreation working with school and daycare to allow for some shared programming.
- Links to local cultural days in Île-à-la-Crosse was very positive for residents

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Discussion about falls, medication errors and other safety needs of residents. Work being done on safety huddles to help staff with identifying how to make improvements
- Looking at scheduling for bathing as some indication of desire for more frequency
- Family and resident involvement in the Family Resident Council has been limited. Work being done to increase interest and involvement.



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Looking to improve rounding and safety huddles
- Ongoing work with families and residents to encourage involvement in Family Resident Council
- Work occurring to improve culturally appropriate care—activities and food

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Long Lake Valley Integrated Health Facility - 73057  
Community: Imperial, SK  
Date of visit: August 13, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Blair Broadfoot	Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Daily huddles occurring - safety is discussed
- Summer barbeque for residents and family is planned
- Activities include outings and visits throughout the community
- All staff trained in GPA (Gentle Persuasions Approach) and using P.I.E.C.E.S
- Resident Family Council meetings are held quarterly
- Continue to enhance falls work
- Increasing activities to include outing and working cooperatively with Watrous to use their bus
- Good partnership with the school throughout the year
- Potatoes are a daily menu item which is a request by the residents
- Raised garden beds are used to allow residents to garden throughout the summer
- Enclosed courtyard – working to redo the fence
- Electric awning can be expanded to offer shade for residents

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Continue to accommodate residents' choice and meet their preferences for activities

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to enhance resident care through giving them choice and voice in their care



**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Golden Prairie - 73549  
Community: Indian Head, SK  
Date of visit: September 24, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Karen Earnshaw	Vice President, Integrated Rural Health
• Dr. Kevin Wasko	Physician Executive, Integrated Rural Health
• Dan Drummond	Director
• Victoria Sutherland	Interim Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Full lines of licensed staff, but no relief, short CCAs, 1 FT RCC, Days – 1 RN; Nights – 1 RN
- Relaxed breakfast – food choices, standardized menu with individualization, good food
- Good activities – small group of dedicated volunteers
- Nice secure outdoor space
- New Palliative space
- Good Pharmacy support, daily huddles

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Plumbing challenges
- CCA shortages
- Ceiling tracks needed
- Laundry going to KBro

Met with Resident:

- Been here for 3 years – had been in Parkside and William Booth in Regina
- Staff is good, feel welcomed and this is my home, really like activities and entertainment is excellent
- Food is really delicious and good access to outside
- Everything I need is here

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- New Manager and Nurse B so difficult to assess but strong leaders in other departments

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Invermay Health Centre - 73773  
Community: Invermay, SK  
Date of visit: August 7, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Elizabeth Palchewich	Health Services Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Father's day BBQ held
- Activity levels are increasing
- Residents noted that the home tries to accommodate dietary needs
- Many residents come to the home as a first-bed and request to stay
- Hallways are clear of equipment and supplies so residents can move safely through the hallways
- New Smart TV received and hoping to use for face time for residents; still working through IT issues
- Activity board posted in public area

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- In need of more ceiling lifts – moving residents is difficult and hard on them
- Phone system is causing concerns and running low on portables

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to meet residents' needs through accommodating food requests and choices
- Continue to improve activities to meet the needs of the residents
- Continue to work on improving the quality indicators including reviewing least restraint policy and best practices

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Ituna Pioneer Health Care Complex - 73784  
 Community: Ituna, SK  
 Date of visit: September 16, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Jacquie Holzmann	Executive Director, Primary Health Care
• Lorie Mokolki	Director, Primary Health Care
• Cindy Cooper	Health Services Manager
• Bernadette Karkut	Registered Nurse/Clinical Care Coordinator

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents enjoy pub night and families are able to participate
- Family and resident feel care is very good and could not ask for more
- Facility improvements in the past year included:
  - Dryer was updated
  - Purchased a new sewing machine
  - One hallway painted and refreshed
  - Two new ceiling lifts installed
  - Kitchen has been updated and renovated but still working out a few issues with flooring and the island
- Working with the local newspaper to share news of the home
- Implemented relaxed breakfast with varying eating times
- Work in progress on daily visual management
- There is an adult day wellness program in place and utilized

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Resident Family Council meeting expressed the need for weekend activities/entertainment
- Could be more outside entertainment/music
- Could be more programming or activities on the weekend
- Opportunity to continue kanbaning with supplies and laundry
- Recruitment and retention is an ongoing concern and challenge



- Availability of the town's handi-bus has reduced significantly which is impacting excursions and outings

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to enhance activities and include guest entertainers as available as well as outside activities as transportation allows
- Continue to Kanban for efficiencies in inventory and ease of ordering

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Kamsack District Nursing Home - 73769  
Community: Kamsack, SK  
Date of visit: June 6, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Suann Laurent	Chief Operating Officer
• Lorelee Davis	Health Services Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- All residents were well groomed and dressed
- Solarium and desk are appreciated
- Activities are well organized and residents that attend enjoy them
- Ideas board on daily visual management wall
- Staff are kind
- Dental Health Pilot
- Facility very clean
- Dietary staff and manager are very client focused and address needs as soon as they know about them

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Continued challenges with flex breakfasts that need to be addressed jointly with dietary and nursing staff as a team to move this forward for all residents
- Entrance to nursing home needs replacement; concrete very uneven
- Residents and families stated bowel and bathroom routines are not consistently implemented.
- Food choices are desired by residents
- Painting is needed and “border” wallpaper needs to be removed in old area of nursing home
- Some residents stated that they have to get up too early
- Need to have accessible doors and new bedside tables
- Physio is lacking and travel is increasing for residents and families to receive this service
- Storage space is lacking



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Purposeful interaction needs to occur and be audited to enhance resident experience
- Small house model need to be looked at across our province to enhance care provision

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Kelvindell Lodge - 73788  
Community: Kelvington, SK  
Date of visit: August 6, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Tanya Neiszner	Facility Manager
• Crystal Prouse	Assistant Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Plans to purchase some new furnishings from Trust Committee for common areas
- Scenic murals on exits to deter exit seeking
- Plans to enhance sitting area on Memory Lane
- Daily Visual management and huddles occurring daily
- Intentions to extend the outdoor concrete pad so more can sit outside at one time
- Grade 4's have a regular visiting program during school year; visit weekly with a year-end party
- Menu posted on the board for residents
- Good community support for donations, fundraising and entertainment
- Large monthly activity calendar posted – smaller versions available for family and visitors to take
- Resident Family Council meeting took place:
  - Reviewed previous activities and sought input; enjoyed balloon artist and fried dough
  - Enjoyed a visit from daycare
  - Residents would like bacon and eggs, perogies (more often)
  - Requested a visit and outing for soft ice cream
- Meals are served from a food cart in the dining room area

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Kitchen door needs widening to better accommodate food cart – to be done this summer
- Enhancement of meal experience could be done through morning cart and doing tableside service



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to enhance the dining experience for residents
- Continue to accommodate resident food choices and preferences
- Continue to provide variety of activities and work to accommodate the requests for specific outings



**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Kerrobert & District Health Centre - 73064  
Community: Kerrobert, SK  
Date of visit: October 2, 2019

Please indicate who attended this visit:

(Name)	(Title)
<ul style="list-style-type: none"><li>Gloria Park</li></ul>	Care Team Manager
<ul style="list-style-type: none"><li>Gayle Riendeau</li></ul>	Executive Director, Acute Care Integrated Rural Health, South West

Please describe what is working well as identified through your visit and discussions with families and residents:

- Resident choices including resident choice meals
- Activities - variety
- Staff work well together to meet client needs

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Activities for evenings – currently exploring options for evenings, including entertainers

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Low rate of client and family resident survey completion – consider how to increase (six residents, zero families)
- Daily visual management – standardization of process and data to include for daily visual management (i.e. safety/costs)

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Kindersley & District Health Centre - 73066  
 Community: Kindersley, SK  
 Date of visit: October 21, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Sharon Forsyth	Facility Administrator
• Gayle Riendeau	Executive Director Acute Care Integrated Rural Health, South West
• Activities Coordinator	Joined Resident Council meeting
• Food Service Supervisor	Joined Resident Council meeting

Please describe what is working well as identified through your visit and discussions with families and residents:

- Food – “Best darn food I ever ate”
- Activities – variety, seven days a week, schedule posted
- Center Courtyard – improvement, accessibility for residents/families through donations
- Input into menu/food choices

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Residents wandering – evenings and disrupting dining room set-up – upsetting to other clients
- Concern from clients re: staff not speaking English when in their presence
- Questions
  - Access to a personal shopper if client requires something?
  - What to do if client witnesses another client hitting a client?

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Consider how to best address resident concerns re: wandering clients while maintaining the rights of all clients, access to common areas (? Need for diversional activities evenings)
- 1:1 follow up provided to clients with specific concerns after the meeting by facility administrator

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Kinistino Jubilee Lodge - 73067  
Community: Kinistino, SK  
Date of visit: October 31, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Andrew McLetchie	VP, Integrated Northern Health
• Recreation Coordinator	
• Nine Residents	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents complemented the nursing and care staff. Felt they were friendly and responsive to their needs
- The facility was very clean and well maintained. The residents appreciated the friendliness of the housekeeping and maintenance staff
- Different dietary needs were supported by the dietary department
- A new tub was being installed. Residents felt the bathing routines met their needs
- Recreation supported the team with various events and outings

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Some residents were looking for more flavorful food
- Concerns raised that some clothing went missing through the laundry process. Staff work with families to mark clothes to prevent this
- Discussion about pets in the facility. Mixed feeling but some residents wanting to see a resident cat

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Resident Council well attended and will continue with recreation leadership
- Semi-Annual Family and Resident Council meetings support the quality work
- Ongoing work on improving dietary experience for residents
- Discussion occurring about how to support pet policies in the northeast

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Kipling Integrated Health Centre – 73545  
Community: Kipling, SK  
Date of visit: July 30, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Kelly Beattie	Facility Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Breakfast continues to be relaxed
- Suzy-Q Cart was fully implemented for lunch and dinner in May
- Computer is not on a movable cart, but location of computer has changed for resident preference
- As a commitment to increase hydration, small personalized water bottles have been implemented for use - residents very much enjoy having their own water bottle
- “Forever in Motion” continues – exercise balls purchased
- Many residents attended Yorkton Exhibition this year – previously attended fall Agribition
- Large board for activities and monthly calendar is posted
- White boards in rooms for care and messaging – also includes a large activity monthly calendar
- TLR logos moved above beds
- Have an arrangement for a regular hairdresser
- Resident comments:
  - *“Love my home; nurses hug me at night when I’m put to bed”*
  - *“Get entertainment once a month”*
- Daily Visual Management occurring every day; boards with staff for the day posted in common area
- The Home averages 3-4 adult day clients that also participate in activities
- Radios have been purchased for staff to ensure better communication throughout the home



Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Continue to work on temperature control within the building

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to offer a variety of activities including the outings
- Continue to work to improve the indoor temperature to meet the needs of the residents

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Kyle Health Centre - 73069  
Community: Kyle, SK  
Date of visit: September 13, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Karen Abrey	Director, Continuing Care
• Tammy Blackwell	Director, Primary Health Care
• Rhonda Bartlett	Care Team Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Considerable work underway to improve the dining experience for residents
- There is wonderful support from the community to visit the residents; the home is a very busy hub
- Very supportive Foundation for the home
- Exit on the home has been painted to distract exit seekers; project done by community art guild
- Beautiful outdoor secure courtyard supported by volunteers and the town of Kyle summer students
- Daily visual management takes place on a daily basis currently working on changing the board
- Activity board posted
- Access to community bus for outings

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Building could use updates for basic maintenance and esthetics
- Ongoing recruitment challenges for RNs and CCAs
- Continue to work on improving the daily visual management board



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to work on enhancements to the dining experience
- Continue to improve the daily visual management board with information and metrics that assist with daily operations for staff
- Work with building services to create a plan for ongoing maintenance and updating esthetics

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: La Loche Health Centre - 73763  
Community: La Loche, SK  
Date of visit: August 23, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Andrew McLetchie	VP, Integrated Northern Health
• Mannish Chaudry	Site Manager, La Loche
• North West Resident Life Coordinator	
• Recreation Worker	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Third Family Resident Council meeting with some family involvement at most meetings (none at this one)
- Appreciation of work to provide local food. Work occurring with dietician to allow for some resident choice
- Good communication of resident likes and dislikes to help guide care
- Work done locally to create more home like environment in long-term care area of health centre

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Inconsistent recreation programming—occurring on three weekdays usually
- Nursing staff involvement in care shared with acute care resulting in some inconsistent presence of nursing in long-term care area
- Desire to see an updated alcohol and drug policy for residents
- Need for wander alert system as residents could access other parts of facility and go outside without being noticed

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Team is working to improve care planning and services in recreation and nursing team
- Ongoing work with families and residents to encourage involvement in Family Resident Council
- Work occurring to improve culturally appropriate care—activities and food



**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: La Ronge Health Care Facility - 73757  
Community: La Ronge, SK  
Date of visit: October 8, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Brett Enns	Executive Director, Primary Health Care North East

Please describe what is working well as identified through your visit and discussions with families and residents:

- Small and quaint home; therefore, you get to know families
- Very active resident/family calendar program
- Appreciate the staff
- Collaborate with other groups
- Good support from community and families

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Further physio assistants are required
- The question was asked as to whether the SHA has bursaries to support high school graduates to go into training for physio? Former Mamawetan Churchill River Region did provide funding to support potential graduates. Are physiotherapists considered hard to recruit and is there incentives to coming to the north?
- Aging infrastructure – where is new build at?
- Further respite and long-term care beds are required
- Short of drivers for the meals on wheels program

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The information from this visit will be shared with clinical programs and Human Resources/Labour Relations regarding recruitment for physiotherapists. Question will be asked of the Ministry of Health as to where the La Ronge Continuing Care project is in terms of planning. Will report back to the resident council the findings

Other:

- Excellent demonstration of personal protective equipment and flu protection
- Excellent safety talks on special dietary considerations, thickened drinks, and different explanation of diets

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Lafleche Health Centre - 73071  
Community: Lafleche, SK  
Date of visit: September 25, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Beth Vachon	VP, Quality, Safety & Strategy
• Kelly Fish	Director, Continuing Care
• Allison Stobbart-Schultz	Transition Lead - Home Care South

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents identified a number of positive aspects in this home – respectful staff, feel cared about, the meals for the most part are very good and that residents feel cared for by the staff

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Activities were the one area identified for possible improvement – would like more activities and more stimulating activities. The residents miss the Activity Coordinator when she has days off
- The attendance at Resident Family Council meetings was poorly attended in the past, but attendance has improved significantly recently

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Through the Resident Family Council, this home is looking at how to increase the volunteer base that supports the home. Volunteers have been recruited from the school. They have also generated ideas on more outings and exploring solutions to the transportation issues with outings

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Lampman Community Health Centre - 73072  
Community: Lampman, SK  
Date of visit: September 6, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Tamara Fichter	Nurse B

Please describe what is working well as identified through your visit and discussions with families and residents:

- “Backyard Bash” held at end of August with a circus theme; it was very much enjoyed by residents and family and spoken highly about
- Fountain is up and running and residents pleased
- Residents loved the visitation held with miniature horses
- Resident Family Council meetings are chaired by a resident and held quarterly
- Received a new lift from redeployment and one from trust/auxiliary
- Residents stated that Staff are like family and always have time to talk
- Family members commented that there is great communication from staff on any changes and information
- Great teamwork amongst the staff
- Many compliments for the efforts to decorate for special occasions

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Concern raised with staffing levels and was appreciative of additional staff to assist
- Variety and choice of food for diabetics is very limited
- Menu needs changing and was promised to be updated but no changes have taken place:
  - There is little or no choice of food options
  - Would like more BBQ’s
  - Would like more variety of meat
  - Would like mashed potato salad - upon hearing this the Cook immediately changed the menu that evening to accommodate the preference
  - Would like fried liver
- No environmental services on the weekend and it is felt that this is a problem
- Would like to see activities at a variety of times especially into evening which would accommodate families that work during the day

- Maintenance/building concerns raised:
  - Concrete in backyard is chipping and hazardous
  - Would like to see the building freshened up with new paint
  - Front slope remains a safety hazard

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to enhance the menu through meeting residents' preferences and choice of foods
- Work with building services for a plan to address the maintenance issues

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Centennial Special Care Home - 73779  
 Community: Langenburg, SK  
 Date of visit: August 22, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Karen Earnshaw	Vice President, Integrated Rural Health
• Cindy LaRocque	Manager
• Lorie Mokolki	Director

Please describe what is working well as identified through your visit and discussions with families and residents:

- 45 bed health centre, 10 bed assisted living attached
- Home Care supports, Telehealth, Adult Day Program, nice palliative space
- Services provided by 1 FT MD; 2 PT MD; 1 NP; 2 licensed nurses Days and 6 CCAs (8 hr days/4 hr) – 4 CCA evenings; nights 2 CCA; 1 licensed nurse; activity department 1 FTE
- Adding IV Therapy to nursing team to keep people at home
- Have a resident council
- Lots of community support
- Bright facility, well-maintained, ceiling tracks in half of the building, have secure outdoor space
- Met with resident:
  - Access to close washrooms in public area, good care, moved in 2 months ago
  - Wife was in care here for 6 months (passed away). “They were good to my wife”
  - Went from living independently to LTC in 9 months, had home care support as well
  - Good entertainment

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Need to work on dining – no flex-time for meals, no meal choices
- Difficult to recruit all classifications due to other very good employers in this area
- Flexing shift lengths and start times to try to increase attractiveness
- Need more housekeeping hours to support PHC. Days of service have increased but no increase in hours
- No Wi-Fi for residents and families
- Need door locks addressed

- Lab & Diagnostics not integrated/no sharing of client information between services (consider a better model)
- One licensed on evenings is not enough for the number of residents
- OH&S constraints - no fall alert system
- No contingency plans developed for work shortage – in process
- Met with resident:
  - Food is ok, but not enough choice, too much focus on healthy choices

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- No contingency plans developed for work shortage – in process
- Central dining – would be difficult to adopt to small house model
- Med Rec process in Regina affect transfers – particularly not using PIPP

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Langham Senior Citizens Home - 73798  
 Community: Saskatoon, SK  
 Date of visit: August 9, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Dalene Newton	Executive Director, Continuing Care – Saskatoon Urban
• Andre Moss	Director, Continuing Care 2 – Saskatoon Urban
• Conrad Jantzen	Administrator
• Kimberly Yelland	Administrative Assistant, Executive Director

Please describe what is working well as identified through your visit and discussions with families and residents:

- The Langham Care Home consists of 17 long-term care beds and is the largest employer in the town
- The exterior of the building has been updated including new paint, and new windows. There are also newly renovated resident rooms. They are renovating rooms one at a time and have completed five so far
- Had several conversations with residents. They all agreed that this is a great place to live and that the staff and residents are very friendly. The residents also really enjoy the activities
- There is a nice large courtyard. A few of the resident's rooms look out to the courtyard; they enjoy watching the birds from their windows
- There are posters outside the resident's room that give a "mini biography" including where they lived, their favorite activities etc.
- The companion suites are very popular, this allows couples to stay together without having to provide care for their loved one on their own

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- The kitchen needs updating; some of the cabinet doors are falling off. Storage for food items is quite far away from the kitchen
- Moving forward with a temporary nurse call system, while the new nurse call system is being implemented
- Administrator noted they require additional funding, and want more support to provide physiotherapy, occupational therapy and social work.

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Langham Senior Citizen's Home is a designated health care organization contracted by the SHA to provide care and service to residents
- The administrator had additional questions regarding the funding model for Long-Term Care Affiliate homes and specifically the funding for Langham Senior Citizen Home. The continuing care director who works with the affiliate homes committed to following up with a subsequent meeting to review specific funding details



**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Central Parkland Lodge - 73791  
Community: Lanigan, SK  
Date of visit: July 31, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Kim Chisholm	Health Services Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Directory at front door to display residents' names for ease of visitors
- Home continues with relaxed breakfast
- Continuing with ongoing work on the quality indicators
- Activities are varied and try to accommodate the preferences and requests of residents; of note is the fishing excursion, drive-in theatre, and attendance at the community tractor pull
- The home shares the results of the Resident/Family Experience Surveys and is doing so at a family BBQ in August
- Tub room was redone
- Activities calendar posted in a public area for all to view
- Care Providers of the day are posted for residents and families
- The daily menu is posted
- Wings in the home have been named by the Residents
- Exits have murals to deter exit seeking

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Adequate staffing continues to be a concern
- Painting needed in numerous areas throughout the home
- Opportunity for 5s'ing



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to work on improving care through improvement of the quality indicators
- Consider painting and esthetics as part of the ongoing maintenance plan for the home
- Schedule 5s'ing activities for supplies

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Western Senior Citizens Home - 73502  
Community: Leader, SK  
Date of visit: August 14, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Scott Livingstone	Chief Executive Officer
• Beverley Thompson	Facility Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Facility is new, very clean and well maintained – still putting some of the final touches on the new site (Emergency Room signage, wayfinding etc.)
- Resident requests and concerns are responded to quickly
- Resident says staff are kind and care is excellent

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Need to formalize Daily Visual Management, including safety huddles
- Integrating medical clinic staff into the flow of the new site
- Manager feels well supported by regional leadership
- Observed lots of interaction of staff across the facility
- Seeing more variety in menu
- Need to evaluate pharmacy services provided via contract to see if driving quality and value

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Staff and leadership commitment to continuous quality improvement and alignment of strategy is evident
- Good use of Daily Visual Management
- Low staff injury rates
- Antipsychotic use – see pharmacy comment above

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Wheatland Lodge - 73592  
Community: Leask, SK  
Date of visit: October 23, 2019  
Please indicate who attended this visit:

(Name)	(Title)
<ul style="list-style-type: none"><li>• Dr. Erin Hamilton</li></ul>	Physician Executive, Integrated Northern Health
<ul style="list-style-type: none"><li>• Debbie Murphy</li></ul>	Facility Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Most families described excellent experiences with transition from either home or hospital to long-term care. All felt they had the information they needed and were happy with access to first choice of locations
- Families appreciated the recreation activities and the resident cats
- Families felt they knew who to go to with a concern and that they were listened to

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Too little activity on Saturdays and Sundays
- Yearly review of care needs and recreation plans may be too little. Family learnt at this venue that assessments of needs are ongoing and happen frequently but that these changes are not always communicated full to family
- Patients and families felt they did not have good access to physician care who comes once a week but is not generally available for family meetings or concerns

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Work on communication with patients and family and care team, including physician needs attention overall. There is very little consistency in physician availability and involvement throughout long-term care system and this was raised by nursing and families at several locations
- Families do not always feel prepared for a decline in health status in their loved ones. Increased access to specialized palliative care support, demential information and support could be improved

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Evergreen Health Centre - 73077  
Community: Leoville, SK  
Date of visit: September 25, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- |  |   |
|--|---|
| <ul style="list-style-type: none"><li>• Neal Sylvestre</li><li>• Chris Thiele</li><li>• Joanne Poulin</li><li>• Six Residents</li><li>• Six Family</li><li>• Two Staff</li></ul> | <ul style="list-style-type: none"><li>Executive Director, Continuing Care North West</li><li>Director, Continuing Care North West</li><li>Recreation Worker</li></ul> |
|--|---|

Please describe what is working well as identified through your visit and discussions with families and residents:

- Rented Handivan from Spiritwood, used 3 X - Folk Fest, Farm Tour and Trip to Spiritwood
- Dietary is good
- Generally, nursing is good apart from staffing
- Survey results shared with Residents & Families
- Craft and bake sale fundraisers are productive
- 29(1) is greatly appreciated
- Residents are well taken care of
- Purposeful Rounding continues
- Resident and Family Council Meetings are typically held quarterly with a pot luck lunch following

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Resident bank account does not exist
- Trouble with billing process, clients were billed every 2 months
- Turnover in kitchen staff is presenting some challenges
- Turnover in nursing staff -two new
- Only two staff on evenings to put residents to bed – not enough staff



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Executive Director of Continuing Care will work in collaboration with other Executive Directors of Continuing Care within SHA to look for issue patterns that may require follow-up across the province
- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue working with families and residents to make improvements. Any significant concerns identified through the tour will be addressed immediately
- A resident bank account is planned to be established in November 2019
- Billing process has since been rectified in collaboration with Finance

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: St. Joseph's Integrated Care Centre – 73079  
Community: Lestock, SK  
Date of visit: September 16, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- |                     |                                     |
|---------------------|-------------------------------------|
| • Christina Denysek | Executive Director, Continuing Care |
| • Lorie Mokolki     | Director, Primary Health Care       |
| • Cindy Cooper      | Health Services Manager             |

Please describe what is working well as identified through your visit and discussions with families and residents:

- Recent outings included attendance at the Pow Wow
- Regular BBQs and bake sales occur for fundraising
- Visited Raymore Nursing Home and attended the dog show
- Supportive Ladies Auxiliary that fundraises and volunteers
- Residents enjoy the outdoor gardening boxes
- Home is beautifully decorated for fall
- Family noted they are very pleased with care, activities and meals

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Ongoing concerns with the current laundry room with its size

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to meet the needs of the Residents as they are raised
- Continue to provide a variety of activities including the enjoyed outings

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Jubilee Home - 73582  
 Community: Lloydminster, SK  
 Date of visit: October 7, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Sarah Tupper	Dietary Supervisor
• Cathy Basilio	Registered Nurse
• Grace Ching	Recreation Coordinator
• Karen Kindrachuk	Meaningful Life Specialist
• Leonard Wegner	Director, Continuing Care North West
• Neal Sylvestre	Executive Director, Continuing Care North West
• Ten Residents	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Gopher problem was resolved
- Dietitian consult for dieting preferences
- Purposeful Rounding every hour
- Flu vaccine October 21, 2019
- Elections Canada –planning in place allowing residents ability to vote in Federal Election
- Saskatchewan personal health information access
- Bird feeder appreciated
- Trips to Casino, Farmers Market, Twinkle Tour

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Plans for summer menu did not move forward. Kitchen staff not ready to change
- Sometimes clothes go missing – all clothes labelled
- One Resident reports call response is up to 30 minutes
- Staff going for breaks together? Non-compliance
- Some Residents are put to bed before they want to be put to bed “It’s not a boarding school” (comment provided by one of our Indigenous Residents)
- Typically, there is limited participation of Family Members at Resident Council Meetings



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Executive Director of Continuing Care will work in collaboration with other Executive Directors of Continuing Care within the Saskatchewan Health Authority to look for issue patterns that may require follow-up across the province
- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue working with families and residents to make improvements. Any significant concerns identified through the tour will be addressed immediately
- Sarah Tupper- Dietary Supervisor – planning to move ahead with Fall menu
- Facility has clothing labeler and heat press; however, sometimes labels fall off
- Director and Facility Manager will follow up on concerns with respect to Call Bell response, staff taking breaks together and resident bedtime assistance

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Loon Lake Health Centre - 73081  
Community: Loon Lake, SK  
Date of visit: April 15, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Kelly Lyon	Facility Manager
• Diane Watt	Recreation Coordinator
• Karen Kindrachuk	Meaningful Life Specialist
• Chris Thiele	Director of Continuing Care North West
• Neal Sylvestre	Executive Director of Continuing Care North West
• Eight Residents	
• Three Family Members	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Building is comfortably warm
- Residents enjoyed “Elvis” show and other scheduled entertainment
- Residents happy with laundry service
- Residents happy with timely installation of ceiling lifts – no disruption
- Purposeful Rounding continues
- Residents appreciative of good nursing care
- Meals are generally appreciated by residents
- Residents appreciate the outdoor space and newer walkways
- Family appreciates Rec staff efforts

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- New heating unit does not have air conditioning
- Interdepartmental representation is not consistent at Resident and Family Council Meetings

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Executive Director of Continuing Care will work in collaboration with other Executive Directors of Continuing Care within the Saskatchewan Health Authority to look for issue patterns that may require follow-up across the province

- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue working with families and residents to make improvements. Any significant concerns identified through the tour will be addressed immediately
- Manager looking at getting air conditioning added on to heating unit
- Facility Manager to encourage interdepartmental representation at Resident and Family Council meetings

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Lucky Lake Health Centre - 73082  
Community: Lucky Lake, SK  
Date of visit: October 21, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Jeannie Munro	Executive Director, Primary Health Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- The writer met with a resident and family member and received the following comments:
  - Very nice facility for the resident to live, close to family
  - Staff are friendly and caring
  - Meals are very good and quantities adequate
  - Activities are suitable though resident doesn't participate that often
  - Appreciates access to physician (he rotates to two other sites) and nurse practitioner on site (current position is vacant but coverage is being provided by two other nurse practitioners)

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Family member stated that the only concern she had was related to access to therapy services. Resident had experienced a fall/fractured hip and they did not see a therapist very often. Family recognized this is only a visiting service but felt greater access would be better
- Manager noted that due to facility age there are some infrastructure challenges; there are times when it may be better to replace an item than continue to fix it

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- There will be continued review and focus on Long-Term Care Quality Improvement Indicator results and development of action plans to address any issues
- There will be review of any resident/client safety incidents and improvement strategies developed
- Use of visibility walls and huddles will continue to keep staff aware of and engaged in both local and Saskatchewan Health Authority priorities

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Lumsden Heritage Home - 73560  
 Community: Lumsden, SK  
 Date of visit: September 24, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Debbie Sinnett	Executive Director, Continuing Care
• Lorri Carlson	Director, Continuing Care
• Sara Cox	Administrator, Lumsden Heritage Home
• The tour included a general meeting with three residents, two Board Members and eight employees and a tour of common areas impacted by roof issues	

Please describe what is working well as identified through your visit and discussions with families and residents:

- The sense of home and relationships between residents and staff
- Pride in the home and the community, strong community ownership and support
- Creative use of resources to provide the best service, including recent restructuring to get additional recreation services at key times
- Everyone works together and helps, from laundry, to food service, maintenance and care staff
- Enjoy activities and events, community involvement

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Significant component of discussion related to resource requirements and care needs, brought forward residents, staff and board. Escalating level of need with 75% of residents requiring assistance with lifts/transfer, and with mealtime assist
- Infrastructure concerns, ongoing issues related to roof leak that has impacted use of the dining/common area. Ongoing for years, very challenging. This is currently in process of repair with Saskatchewan Health Authority support
- Concern re: access to support resources (Human Resources, Legal, etc.) for affiliates from Saskatchewan Health Authority, by Board and Administrator, noting small homes do not have the resources to access these services on their own
- Resident Transfers – as information used by Program Access on transfer is the original assessment, it is often several years out of date, need to ensure information shared is current as decisions made on determining if care needs can be met are based on this. Has resulted in a couple of transfers having to be re-done due to gaps. Hope that LTCF will address

- Infection control – work required with Infection control and long-term care to achieve balance and understanding of 24/7 long term home environment – concerned that some expectations are inappropriate for non-acute, stable environment

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Daily Visual Management processes were not identified during the visit and potential for opportunity to use this process to work through some of the daily workload concerns, pressures and any opportunities for improvement
- Capital and operational funding processes, corporate services support are part of the provincial work on the Principle and Services Agreement for 2019/20. Feedback on progress to be shared through PARG and Regina Continuing Care meetings with affiliates
- Infection control standards and balancing with long-term living environment is a common thread for follow up provincially
- High quality, safe transitions in care – provincial work ongoing

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: St. Joseph's Integrated Health Centre - 73085  
 Community: Macklin, SK  
 Date of visit: October 15, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Michael Lummerding	Facility Executive Director
• Joanne Doetzel	Recreation Worker
• Leonard Wegner	Director, Continuing Care North West
• Neal Sylvestre	Executive Director, Continuing Care North West
• Eight Staff	
• One Family member	
• Nine Residents	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Replacement of Nurse Call system – completion end of Oct 2019
- Residents enjoy flavored coffee
- Kitchen is very accommodating – veggies donated – Public Health Inspector approved
- Residents really like the fresh produce
- Residents happy with nursing care
- New cement work – front of building –very nice
- Using Electronic Funds Transfer for past eight months –half of residents are using
- Building temperatures are good – summer and winter
- School Program – Grade 4
- Family Fun Day –August 20, 2019 at the lake
- Installation of two new ceiling tracks
- New blinds

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Windows need cleaning
- No tracking of Purposeful Rounding
- Issue with staffing after breakfast
- Wanderguard is paid for separately -\$15/month- not consistent across SHA
- Activities – 830 to 1700 – Rec Staff supports Resident feeding
- Resident would like a Breakfast Club – no stove in activity room
- Difficult finding entertainment



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Executive Director of Continuing Care will work in collaboration with other Executive Directors of Continuing Care within the Saskatchewan Health Authority to look for issue patterns that may require follow-up across the province
- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue working with families and residents to make improvements. Any significant concerns identified through the tour will be addressed immediately
- Staffing after breakfast– this has improved since June due to resident turn over
- Wanderguard fees – There is an awareness of inconsistent practice. Plan to identify a consistent Saskatchewan Health Authority process/approach in the future



**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Maidstone Health Complex - 73583  
 Community: Maidstone, SK  
 Date of visit: June 11, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Lance Turcotte	Facility Manager
• Paula Newstead	Recreation Worker
• Sarrah Tupper	Dietary Supervisor
• Karen Kindrachuk	Meaningful Life Specialist
• Neal Sylvestre	Executive Director, Continuing Care North West
• Two Staff Members	
• Eight Residents	
• One Family member	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents compliment the beautiful work/maintenance in the outdoor areas
- Residents look forward to the regular weekly outings, a Casino outing to Lloydminster in particular
- Rec fundraisers are raising a nice sum of money – BBQ, Raffle and Garage Sale
- Appreciate regularly scheduled family conferences with nursing
- Purposeful Rounding is ongoing
- Residents and family are generally quite pleased with the quality of the meals
- Resident and Family Council Meetings typically have good interdepartmental representation
- Maidstone EMS sometimes spend time visiting with residents which is greatly appreciated
- Regular entertainment is scheduled throughout the year
- School visitation program is ongoing and appreciated by residents

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Ants seem to be an issue
- Residents would like to know the new dietary menu
- Patio refurbishment project - waiting for funds to be approved
- Some clothing not labelled

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Executive Director of Continuing Care will work in collaboration with other Executive Directors of Continuing Care within the Saskatchewan Health Authority to look for issue patterns that may require follow-up across the province
- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue working with families and residents to make improvements. Any significant concerns identified through the tour will be addressed immediately
- Orkin is coming to spray ants
- New three-week dietary menu will be posted so residents and family can view
- Patio refurbishment project – Executive director and facility manager will follow up as there was a \$10,000 donation identified to specifically be spent on that project
- Clothing not labelled – Facility manager is determining which model to order

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Prairie View Health - 73087  
 Community: Mankota, SK  
 Date of visit: August 6, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Dr. Kevin Wasko	Physician Executive, Integrated Rural Health
• Cara McDavid	Director, Primary Health Care
• Kelly Fish	Director, Continuing Care
• Denette Warberg	Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Well maintained new kitchen
- Social interaction good
- Happy with food
  - Menu choices, diet is adapted
- Staff is attentive/interactive
- Activities are great
- Residents are taken out on outings
- School kids come up during holidays, graduation
- Facility is family-oriented
  - Personal touch
  - Staff are looking after family and friends
- Residents feel comfortable
- Residents feel they have a purpose

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Keep flies/mosquitos controlled outside
- Outdoor space (3 season room)
- Handi-van access would be helpful
- No shower in facility (actually is a shower)
- Has heard staff talk to residents like they are babies
- More drives outside would be nice
- Rarely have music (recorded or live)



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- This LTC really has a home feel to it and reinforced that we should strive to make our facilities feel more like homes and less like institutions. Activities, spaces, outings and entertainment are important for quality of life for our residents and their importance should not be minimized

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Southwest Integrated Health Care Facility - 73504  
Community: Maple Creek, SK  
Date of visit: October 1, 2019

Please indicate who attended this visit:

(Name)

(Title)

- Brenda Schwan Executive Director, Primary Health Care, Integrated Rural Health
- Melissa Schwab Manager, Southwest Integrated Health Care Facility

Please describe what is working well as identified through your visit and discussions with families and residents:

- Activities are good
- Food is good – especially the “German Meal”
- Good care – “I feel my loved one is safe”
- Residence access to the outdoors

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Families outside of Resident/Family Council would like to be more connected to the care staff

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Explore having Nurse Practitioners throughout the province to enhance services in Long Term Care

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Northland Pioneer Lodge - 73587  
Community: Meadow Lake, SK  
Date of visit: July 17, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Andrew McLetchie	VP, Integrated Northern Health
• Neal Sylvestre	Executive Director, Continuing Care North West
• Shelley Wasyliw	Facility manager, Northland Pioneer Lodge
• Veronica	Recreation worker, Île-à-la-Crosse
• Joe	Maintenance worker
• Ten Residents and Family Members	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Responsiveness to maintenance requests from residents and family is good
- Winning best float in Meadow Lake parade was highlight—good involvement of residents, recreations and volunteers
- Residents appreciated barbecues during the summer
- Housekeeping doing a good job. Residents felt the facility was very clean
- Purposeful rounding being done and working well

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Vegetables overcooked—work being done to improve process and address timing issues
- Out of town trips not occurring due to changes in availability of a bus from the City of Meadow Lake
- Sidewalk and ramp breaking down creating a tripping hazard outside the building
- Desire for more info for residents and family on changes with new residence planning



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Maintenance looking at repairs to sidewalk with City
- Family and resident council meetings planned ahead. Communication about the new facility being developed for Family Resident Council
- Ongoing work on improving meal experience

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Parkland Place - 73761  
Community: Melfort, SK  
Date of visit: July 12, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Dr. Susan Shaw	Chief Medical Officer
• Maily Lockhart	Executive Assistant, Chief Medical Officer

Please describe what is working well as identified through your visit and discussions with families and residents:

- Facility is well maintained and has a welcoming environment
- Skilled and knowledgeable facility administrator leading and supporting staff
- Residents are encouraged and able to personalize their home and pursue their hobbies in a supported environment.

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Management and staff have safety concerns particularly at night as cellphone coverage doesn't cross from house to house
- Challenged to use TLR practices at night based on staff to resident model
- K-Bro Linen comes in bags rather than folded which results in additional staff time to sort and store. This removes staff from time with residents
- Opportunity to increase use of visual management to engage staff and seek improvement ideas

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The information gathered from the visit will be shared with the executive director and directors responsible for the home.
- Better understanding of the commitment of our staff and the challenges our facilities create for residents and staff
- Consideration of further expansion of Patient and Family Centred Care supports to LTC teams



## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: St. Paul Lutheran Home - 73780  
Community: Melville  
Date of visit: July 26, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Suann Laurent	Chief Operating Officer
• Danielle	Director of Long-Term Care
• Sheri	Administrator, St. Paul Lutheran Home

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents enjoy cats & birds
- Outings are appreciated & enjoyed
- Staff are kind and responsive
- “Food is pretty good”
- Residents like fresh fruit & veggies
- Home is clean & tidy
- Gardening program was highlighted as a positive program
- Musical entertainment on Sunday is appreciated by many
- Resident family council meetings held monthly

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Keep addressing ceiling light needs
- Roof repairs are being done
- Need to paint Whitmire Lane and Bethany Lane
- Keep working on RN/LPN recruitment and explore NP
- Need to explore relaxed breakfast
- Some residents stated they would like more cultural foods

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Summary of wall walks in note summary on wall for anyone to read
- Wheelchair swings

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Mainprize Manor & Health Centre - 73530  
Community: Midale, SK  
Date of visit: August 20, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Karen Earnshaw	Vice President, Integrated Rural Health
• Cyndee Hoium	Manager
• Kelly Fish	Director, Continuing Care
• Lori Tulloch	Director, Primary Health Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- 15 beds
- Manager is shared with Lampman
- 1 RN Days & Nights; 12 hr SCA Days & Nights; 6 hr SCA; 1 MD Tuesdays; 1 NP Monday and Thursdays; 1 MD 1 day/week; 1 CLXT 1 Day a Week
- Building is well-kept, good support from community (volunteers and financial)
- No staff vacancies. Very little overtime and sick leave. 'Culture' is very positive and foundational – teamwork
- Have own van and provide lots of outings
- High survey responses and no QIs
- Met with several residents
  - Very positive, pretty good. Family is welcome and staff are very accommodating
  - Have been here several years and can't beat it
  - Food is good
  - Compassionate staff that makes all the difference

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Given small size – Resident Council is not well attended except when planning events or special meals. Food is a main driver
- No ceiling track lifts in place

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Trust very supportive
- Equipment is well maintained
- Continue to support the culture that exists and work with community to maintain positive relationship

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Bethany Pioneer Village - 73795  
Community: Middle Lake, SK  
Date of visit: August 6, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- |                     |                                     |
|---------------------|-------------------------------------|
| • Christina Denysek | Executive Director, Continuing Care |
| • Lisa Irlbeck      | Administrator                       |
| • Jan Berger        | Director of Care                    |

Please describe what is working well as identified through your visit and discussions with families and residents:

- Resident Family Council Meeting took place with 16 residents attending with generalized comments:
  - Enjoy the variety of activities including making headcheese, pen pal exchange, quilt making
  - Enjoy music and entertainment
  - Like the variety of foods and have really enjoyed the Saskatoon berries and cakes
  - Residents enjoy the variety of activities and the ability to self-select
  - Suggestion that coffee at the start or during meal would be enjoyed
  - Laundry is good - no missing articles
  - Suggested having another Danish/donut day from Humboldt bakery
  - Rooms are well cleaned; no concerns raised
  - Office does a good job of answering questions
  - Requested a board in main area with date and day posted
  - Looking at attending a Bronco game this fall/winter
  - Hawaiian day being held in August
- Beautiful outdoor space well maintained and enjoyed by residents
- Grand opening of multi-purpose hall planned
- Fresh paint in some areas of the home
- Visiting dentist to start

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Call system is a continuing concern
- Phone system is also beyond repair with constant challenges
- Recruitment of nursing staff continues to be a challenge



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to seek recruitment strategies that can address challenges in rural communities
- Continue to address infrastructure to ensure safety and quality

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Montmartre Health Centre - 73535  
Community: Montmartre, SK  
Date of visit: July 30, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- Christina Denysek Executive Director, Continuing Care
- Sabrina Bovee Facility Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Through support of local trust committee, the outdoor space is being revitalized with new sidewalks and a front patio (these have been poured); further work continues on the railing and other enhancements
- Resident Family Council have been working to implement a Walk of Honour
- New pictures for walls have dressed up the building
- Cloth napkins are being used as part of the enhanced dining experience
- Through a partnership with the school's industrial arts class, shadow boxes have been built for each resident's room
- Information station is used in the public area - contains education events, new staff, activity calendar and Resident Family Council meeting dates
- Moving to a new medication system with the community pharmacy
- Suzy-Q cart used for all meals

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Continue with the work to complete the outdoor space
- Continue to install the shadow boxes and encourage residents and families to personalize these
- Ongoing work underway on enhancing dining experience

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue with the improvements underway to enhance the resident's home and their experience

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Extendicare Moose Jaw - 73518  
 Community: Moose Jaw, SK  
 Date of visit: September 24, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Karen Earnshaw	Vice President, Integrated Rural Health
• Dr. Kevin Wasko	Physician Executive, Integrated Rural Health
• Rhonda Farley	Administrator, Extendicare Moose Jaw
• Karen Abrey	Director, Continuing Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- 160 employees, 125 beds, special needs unit – 2 nursing units: D – 4 RN/RPN, 14 CCA; E – 2 RN/RPN, 1 LPN, 12 CCA; N – 1 RN, 4 CCA
- Resident council meets monthly– menu choices are discussed and good fundraising
- Department heads/nurses huddle daily Monday to Friday. Meet using Extendicare format
- Patient Satisfaction surveys good, done by Extendicare
- Secure outdoor space
- Tub rooms have ceiling tracks, good preventative maintenance contract for lifts
- Low number of outbreaks/year
- Director of Care actions all QIs. MDS is up to date. Extendicare also has own QIs – antipsychotic, falls, wounds and least restraints
- Relaxed breakfast, food choices. Residents served at table. Menu is developed by corporate office, families are happy with staff

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Families wish for private rooms – mostly semis and four-bed rooms. 21 Private rooms – first available bed
- Home is old - asbestos labelling; crowded hallways; mold issues in tub room; do own laundry; shared washrooms; no ceiling tracks in small rooms.
- Struggle to find cooks

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- No emergency generator, working with engineering firm
- Challenge with new pharmacy contract – was with Pharmasave but Extencicare contract is with Shoppers out of Regina. Challenges with getting medication changes, etc. Pharmacist attends once a week
- Daily Visual Management not happening effectively or consistently
- Declutter hallways and reduce number of four-bed wards



**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Pioneer Lodge - 73520  
Community: Moose Jaw, SK  
Date of visit: September 5, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Brenda Schwan	Executive Director, Primary Health Care, Integrated Rural Health
• Karen Abrey	Director, Continuing Care, Integrated Rural Health
• Cynthia Hanson	Manager, Pioneer Lodge

Please describe what is working well as identified through your visit and discussions with families and residents:

- Introduction of a bariatric room
- Wall protection now installed in resident rooms
- Call bells installed in resident washrooms
- If a family has issues they know who to contact
- Partnership with Heartland Hospice

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Facility needs paint
- Families would like the residents to have more choice

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Emphasis on a resident centered model of care in Long Term Care

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Providence Place- 73523  
Community: Moose Jaw, SK  
Date of visit: August 26, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Scott Livingstone	Chief Executive Officer
• Georgia Hutchinson	Facility Manager
• Heather Kuntz	Director of Care
• Bill	Patient Council Chair
• Sandra	Patient Council Vice-Chair

Please describe what is working well as identified through your visit and discussions with families and residents:

- Facility is clean and well maintained – paint and interior looking a little dated but are looking to renew
- Resident requests and concerns are responded to quickly. Strong Resident Council
- Staff are kind and care is excellent
- Working to make things visible (Daily Visual Management), and are working to formalize Daily Visual Management including safety huddles
- Facility leadership very positive/very patient and resident focused leadership

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Staffing on nights is being evaluated
- Observed lots of interaction of staff across the facility
- Seeing more variety in menu
- Working on their outside spaces and gardens for activities
- Some resident concerns over provincial linen service and in particular, the washcloth quality. Concerns have been raised by leadership team through 3S Health
- Window replacement underway in staged manner and looking at options for blind replacement



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Staff and leadership commitment to continuous quality improvement and alignment of strategy is evident
- Good use of daily visual management/huddles

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: South East Integrated Care Centre - 73504  
 Community: Moosomin, SK  
 Date of visit: July 29, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Amanda Watson	Director of Continuing Care
• Jenna Grose	Resident Care Coordinator

Please describe what is working well as identified through your visit and discussions with families and residents:

- Menu Board posted for the residents on a daily basis
- At the request of the Resident Family Council, individual team boards in rooms went to one large board in common area
- Use visual “Q’s” such as stop signs and yellow bands across doorways
- Wall mount Personal Protective Equipment/Isolation stations are being utilized which allowed for the carts to be removed from the hallways
- Extenders on have been put on to some tables to accommodate residents
- Attended the Resident Family Council meeting with fifteen residents/family members present:
  - Suggested performers
  - Update provided on staff changes and physician coverage
  - Directory – still working on a digital version
  - Thanks were extended to staff for accommodating special meals for allergy
  - Use of wheelchair alarms
  - Murals recently installed on exit doors
  - Tried an evening meeting but saw better attendance during the day
- Daily Visual Management with all departments – use safety crosses to track incidents, falls
- Continue to do Quality Improvement Plans for all indicators and follow up regularly to implement
- Lovely garden courtyard



Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Foot care is raised as a concern and having timely access

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to meet the needs of the residents and accommodate their requests
- Continue to work on improving quality indicators
- Continue to work on opportunities to improve foot care for residents as requested

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Pineview Lodge - 73756  
Community: Nipawin, SK  
Date of visit: August 1, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Andrew Will	VP, Infrastructure, Information and Support
• Karri Franklin	Director of Continuing Care
• Kellie Stroeder	Facility Administrator

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents and family members commented very positively about their experience in Pineview Lodge. They expressed their appreciation for the staff and care provided. They appreciated church services (every Thursday) and music activities in the facility. Residents commented that the food was good but had some suggestions related to preferences indicated below.

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- While they commented that food was good, residents felt that there are too many green beans in the menu and commented that they prefer the “meat and potato type meals”. They appreciated the new blinds that have been installed in Resident rooms, but in some rooms, there are challenges with light coming through around the edges.

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- There is an opportunity to improve the quality (softness) of towels, and staff expressed that there were some challenges where residents have had reactions to the detergent used to wash linens processed by the linen service provider. In addition, there are ground grading issues inside the main courtyard that need to be addressed. There have been improvements to the grading on the exterior portions of the building outside the courtyard. There are some roofing issues with leaks, which need to be repaired.

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Nokomis Health Centre – 73105  
Community: Nokomis, SK  
Date of visit: July 17, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Kim Chisholm (covering Manager)	Health Services Manager (Lanigan)

Please describe what is working well as identified through your visit and discussions with families and residents:

- Current work to revitalize recreational activities
- Resident Family Council were running quarterly; need to re-vigorate
- Mattresses have been purchased for the home
- Through a donation, a ceiling lift was purchased and installed
- Resident and Family BBQ held to review and present experience results
- Purposeful interactions are ongoing
- Board is posted with names of staff working for the day
- Daily visual management occurring with a Board and includes all departments
- Outing to Watrous to Danceland and museum held and very much enjoyed

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Hallways could do with painting and touch ups and repair of chips/nicks
- Residents would like an additional ceiling fan in the main area and more clocks

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to provide activities that meet the needs of the residents
- Continue to improve the home environment with painting areas
- Work with building services to install an additional ceiling fan and purchase additional clocks for the main activity/dining area



## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Norquay Health Centre - 73771  
Community: Norquay, SK  
Date of visit: June 28, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Suann Laurent	Chief Operating Officer
• Patrick Livingstone	Nurse in charge

Please describe what is working well as identified through your visit and discussions with families and residents:

- NP is available five days/week
- Residents enjoy the dietary focused groups for spring, summer and fall menus which resulted to Bannock being added to menu
- Dental Health and Doctor visits are appreciated by residents and families
- Residents love outdoor space and activity and recreational programs
- Staff treat residents well. They would like to have the opportunity for more outings
- Facility is clean and cared for
- Residents enjoy the children and students that come to visit

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Need to explore options for relaxed breakfast
- Need to look at updating access for computers for staff
- Continue to purchase ceiling lifts
- Need to look at standardized provincial admission process for LTC

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Resident Council meetings are occurring but need to occur monthly – last one was March 21, 2019
- Ongoing recruitment strategies needed for cooks and dietary staff



**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: River Heights Lodge - 73579  
Community: North Battleford, SK  
Date of visit: September 25, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Dr. Erin Hamilton	Physician Executive, Integrated Northern Health
• Kelly Day	Facility Manager
• Karen Kindrachuk	Meaningful life specialist, North West

Please describe what is working well as identified through your visit and discussions with families and residents:

- Staff generally very attentive
- Family felt there was good collaboration between nursing and physician to care for patient in accordance with his wishes
- Residents have 'pen pals' with local elementary school students

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Residents would like to be able to access more than one bath per week
- Extended periods of outbreak precautions are very difficult on residents and feel like unnecessary burdens
- Staff turnover results in poor consistency in care
- New call bell system was noted to increase the overall sound level in the building and can interfere with sleep

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Evaluation of current outbreak precautions should be assessed for effectiveness. Could alternate measures be done if outbreak lasts greater than one week to minimize impact on resident quality of life? Increase communication to families and residents about the importance of outbreak precautions may be required
- The quality of recreation provided by trained recreational therapists was noted and felt to be a good investment
- Staff retention impacts directly on resident quality of life

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Villa Pascal - 73580  
 Community: North Battleford, SK  
 Date of visit: September 25, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Dr. Erin Hamilton	Physician Executive, Integrated Northern Health
• Heather Beatch	Facility Manager
• Karen Kindrachuk	Meaningful life specialist, North West

Please describe what is working well as identified through your visit and discussions with families and residents:

- Lots of choice for food at monthly BBQs
- There has been lots of live music for recreation this past month
- They are restarting the current events group
- Daily exercises on weekdays
- Availability of 'couples rooms' when needed
- Daycare and schools visit frequently

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Weekends are boring due to no recreation activities
- Noted that nursing changes are hard on residents
- Other residents behaviors can be difficult to tolerate
- Not a lot of participation in monthly resident council meetings
- Poor Wi-Fi access

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Management notes that having frequent contact with staff and knowing them well by doing scheduling in a small facility has allowed for less overtime
- Lack of internet access was heard as a concern at several facilities which should be addressed as a system as residents of long-term care are wanting to connect with family and use technology to do so



- Affiliates have expressed confusion as we have merged to SHA in who to contact for concerns although they acknowledge that this has improved. Attention to how internal changes affect affiliates and how changes are communicated needs to be maintained.
- Efforts at this facility to reduce waste by eliminating single use plastics for BBQs and events should be commended and considered in other facilities.

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Outlook & District Health Centre - 73110  
Community: Outlook, SK  
Date of visit: October 15, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Jeannie Munro	Executive Director, Primary Health Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- There was no Resident/Family Council this day so the writer met with a resident and family member. The following is the family member's feedback:
  - Resident has been in the facility for 1 ½ years and the family is satisfied with the care given; the staff are friendly and do their best
  - This family member spends every day with the resident and supports his care as he can; he identified there can be times that staff are busy and they have to wait for their response, but this was not viewed as a significant challenge
  - The resident is now on pureed diet, so there were no concerns related to dietary and meal options
  - Facility is clean and well maintained
- Notes from last Resident/Family Council meeting indicated family satisfaction with activities/outings
- Having all services under one roof (acute/LTC/community based and physicians) is an asset

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- This family member had no specific areas of concerns or areas for improvement
- There was a concern regarding meals/dietary at previous Resident/Council meeting, which was being followed up on (no specific note related to the concern) and would be reported back at next meeting
- Management reviewing safety incidents/med errors and Long-Term Care Quality Improvement results
- Management stated some family have identified challenges regarding staff with English as 2<sup>nd</sup> language (ability for resident/family to understand or these staff talking amongst themselves in their native language)



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- There will be continued review and focus on Long-Term Care Quality Improvement Indicator results and development of action plans to address any issues
- There will be continued review of any resident/client safety incidents and improvement strategies developed
- Continue with Resident/Family Councils to keep the voice of the resident/family at the forefront

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Galloway Health Centre - 73111  
Community: Oxbow, SK  
Date of visit: September 5, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Amanda Watson	Director Continuing Care
• Sheena Grimes	Director Primary Health Care
• Caroline Hill	Community Health Services Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Excellent support from the auxiliary to expand the outdoor courtyard; now includes a pergola and a wheelchair swing
- Working on a replacement handi-van; this is used by the home and available to community
- Have recreation hours seven days a week; would like additional hours to enhance recreation programming
- Home has white boards in each resident's room for communication
- Meals are posted and visible to be seen by residents

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Summer menu could have been improved to include more barbeques
- Opportunity to improve case conferences
- Daily Visual management and daily huddles offer opportunity for improvement
- Recruitment difficulties with LPNs
- There is a query on need for additional WanderGuard doors

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to work on menu enhancements to meet residents' choices
- Improve daily visual management and huddles
- Continue to work on improving care conferencing

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Foyer St. Joseph Nursing Home - 73512  
Community: Ponteix, SK  
Date of visit: August 29, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Deb Hapke	Facility Executive Director
• Kelly Fish	Director, Continuing Care
• Roxanne Stringer	Nurse B
• Beth Vachon	VP, Quality, Safety & Strategy

Please describe what is working well as identified through your visit and discussions with families and residents:

- The residents all spoke to the kindness of the staff – very caring and helpful in addressing needs and assistance required
- All spoke positively about the quality and quantity of food and that their laundry and personal belongings are well taken care of
- There were many positive comments from family members through the Experience Survey

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- It was suggested that there be more variety in activities

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The Foyer uses a Gentle Persuasion approach for responsive behaviors
- The Resident Family Council meetings are well attended

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Red Deer Nursing Home - 73765  
Community: Porcupine Plain, SK  
Date of visit: August 1, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Andrew Will	VP, Infrastructure, Information and Support
• Karri Franklin	Director, Continuing Care, Tisdale and area
• Anita Watt	Facility Manager, Red Deer Nursing Home

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents and family members indicated their appreciation for the care provided by staff. Residents appreciated activities provided in the facility. Residents commented that the food provided in the facility is good

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- While residents indicated food is good, there were some preferences expressed (example preferred beans less often and they would appreciate eggs more often)
- One family mentioned that during their palliative care experience they felt there was a lack of coordination/communication between nursing staff regarding information they shared with the family and questions they asked of the family

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- There is a problem with the roof leaking related to ice build-up. Maintenance has identified that heat tape may be a solution. This work needs to be done prior to this winter



**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Preeceville District Health Centre – 73117  
Community: Preeceville, SK  
Date of visit: July 19, 2019

Please indicate who attended this visit:

(Name)	(Title)
<ul style="list-style-type: none"><li>Christina Denysek</li></ul>	Executive Director, Continuing Care
<ul style="list-style-type: none"><li>Laura Beatty</li></ul>	Assistant Health Services Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Created a family room which is utilized well
- Continued to 5S throughout the home
- Was able to work on the staff schedule and now provide activities 7 days/week
- Family spoke very positively about their palliative experience and grateful for the care of the staff
- Daily visual management occurring – Board contains all departments
- One segufix in use – GRIT (Geriatric Resource Intervention Team) team involved
- Signage has been put up to help some Resident’s find their way
- Cart – tableside service at meals
- Adult day program offered

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Need to continue to improve food/menu
- Looking forward to more activities
- There is opportunity to offer relaxed breakfast
- Accommodate preference for dining – quieter and in smaller groups

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to work on improving the food and dining experience
- Continue to work on improving the quality indicators

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Herb Bassett Home - 73594  
 Community: Prince Albert, SK  
 Date of visit: September 24, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Lisa Major	Executive Director, Continuing Care North East
• Monica Slobodzian	Administrative Assistant, Executive Director
• Darlene Batty	Director, Continuing Care North East
• Becky Kaptein	Social Worker
• Four Residents	
• Five Family Members	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Everything!
- Food is mainly good.
- Excited to see changes in the new meal rotation that is starting next week.
- Food servings are plentiful and we can always ask for more.
- Would like to see water on the table more often.
- Recreation does a great job.
- Jen, Rec Director, is always very pleasant, perky and positive.
- Very happy that the Nursing unit Manager position will be covered. Strong feeling of this position improving communication and tying everyone together.
- This facility is just as good as Leask! (Whispering Pine Place).
- We receive great care here.
- Special events are very well done, i.e. Birthday's really make the Resident feel important.
- Music is always well attended and enjoyed.
  - Recreation always make sure to include and bring out residents that may not otherwise come out of their rooms. Very good at engaging this part of the resident population.
- Family members feel very comfortable approaching "Person in Charge" if they have any concerns.
- New van will help with outings. Residents very pleased with this.
- There are many Volunteers (one resident shared that Prince Albert has the highest rate of volunteers in Canada).
- Courtyards are beautiful and inviting, however, underutilized.

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Communication between staff needs to be better. Management to Staff, and Staff to Staff. Small things that improve quality of life for residents.
    - Evenings especially, seem to miss information.
      - Could there be an allowance of 15 minutes between shifts to communicate how the day has gone, how the residents are feeling?
    - Whiteboards are great but are NOT utilized or read by some. Families have been told “I don’t read those, I just do what I do.”
    - Needs of the Resident need to take priority over “what the staff feel like doing”.
    - Very “defined” jobs. Frequently hear “that’s not my job”.
  - Posters tend to become “wallpaper”. Staff do not read or state they do not have time.
  - Different types of care it seems depending on rotation. Resident expected to wait for care i.e. toileting.
    - Seem understaffed at mealtimes.
    - Staff breaks should not coincide with resident meals.
  - Paradise Path is overcrowded and very difficult to navigate with Broda Chairs. It is very noisy and therefore, reactive to some behaviours.
  - There is a need for more “Plan B’s”. The week of the tour meals had been late all week resulting in family members that take time away from work to feed their loved one, having to leave before feeding or return to work late.
  - Sometimes when this happens, frustration comes out. Some staff are excellent at entertaining Residents when there is a delay.
  - Families that visit frequently do not feel that they can go away and trust that the care will be consistent. They feel the need to have “reminders” in place.
  - Resident would like to have exercise dumbbells for upper body strength.
  - Having the kitchen open 24/7 would be more like home. If a resident wants to get up in the middle of the night for a snack they should be able to.
  - Breakfast eggs are always poached. We would like some variety. (One family member stated that he has asked for scrambled eggs for his wife and it has not been a problem.)
  - Minced and pureed meals are not always the same as what is being served.
  - Soft fruit for snacks would be a nice change instead of sweets all the time.
  - Would like more outings such as picnics.
- Recreation does a great job Monday to Friday but cannot say the same for weekends. There is a big void on the weekends.

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Director Continuing Care NE ~ Prince Albert & Area, Darlene Batty, Facility



Administrator, Charlotte Powalinsky; Nurse Manager's, Cathy Suchorab, Maureen Dynna, and Lori Herzog and ED of Continuing Care, Lisa Major to look at patterns of issues that may require follow-up.

- Discussion of issues with the family or resident councils will occur. Escalation to leadership done as needed.
- Feedback provided will be provided to leadership to help inform improvement efforts in Continuing Care.

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Mont St. Joseph - 73595  
 Community: Prince Albert, SK  
 Date of visit: October 2, 2019

Please indicate who attended this visit:

(Name)	(Title)
<ul style="list-style-type: none"> <li>• Lisa Major</li> <li>• Monica Slobodzian</li> <li>• Five Residents</li> </ul>	<ul style="list-style-type: none"> <li>Executive Director, Continuing Care North East</li> <li>Administrative Assistant, Executive Director,</li> </ul>

Please describe what is working well as identified through your visit and discussions with families and residents:

- Resident acknowledged that “first of all, none of us want to be in a nursing home”. However, this home is quite nice
- Appreciation voiced regarding keeping home seasonally decorated. Currently fall decorations
- Having children around with the Day Care being there is a real delight. They are always well behaved. Quite a delight to watch and interact. Residents are able to read children stories
- There is always someone to help me get to meals and activities. Sometimes we have to wait until staff are able to take us to and from meals and activities
- I like it here because it is familiar to me. Daughter lives in Regina but resident feels connection to friends in Prince Albert and receives visitors often
- Staff are always polite and respectful
- I feel like I am “heard”. I am comfortable saying “no” if there is something I do not want to do
- Staff are very friendly and treat us well
- Family is allowed to join us for meals
- They have “Puppy Classes” every Tuesday. It is fun to participate and watch how the puppies are improving with their training
- It is not “home” but I feel well looked after
- We have freedom to make choices as to what we want to do
- We can go to bed when we want and get up when we want
- Had a lovely Thanksgiving meal.

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Entertainment is lacking. We do not have much for Music without volunteers
- Would like to see more outings
- Menu choices are lacking. Choices currently “like it or leave it”. Choice may include potato or rice, however, not a choice of main course
- Food is often not hot as it comes from the hospital. It is often tasteless and bland
- Hospital food!
- Breakfast allows for more choices
- It appears money does not allow for more outings
- The monthly calendar can be a bit deceiving. Not as much going on as appears on the calendar
- Sometimes when we ring the bell, it takes quite a while for someone to respond
- Communication is sometimes an issue. Shaw TV scheduled to come and change resident services. They arrived at mealtime and resident was not informed. Had to reschedule appointment
- There has been an increased change in staff. Staff (fulltime) know what residents like or need and do not always communicate this to casual or new staff
- Can staff possibly stagger their breaks? They are very “set” on their times and sometimes their breaks are at times when residents require more attention
- When resident first came to home she felt she may have answered some of the admission questions wrong or differently than she would have as it was a very “chaotic” time having to leave own home and all of a sudden rely on others. She would like opportunity to review questions again as she now feels more settled

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Director Continuing Care North east for Melfort & Area, Sandy Weseen; CEO, Brian Martin; Director of Care, Lisa Rock and Executive Director of Continuing Care, Lisa Major to look at patterns of issues that may require follow-up
- Discussion of issues with the family or resident councils will occur. Escalation to leadership done as needed
- Feedback provided will be provided to leadership to help inform improvement efforts in Continuing Care

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Pineview Terrace - 73596  
Community: Prince Albert, SK  
Date of visit: October 23, 2019  
Please indicate who attended this visit:

(Name)	(Title)
<ul style="list-style-type: none"><li>Erin Hamilton</li><li>Terri McMillan</li></ul>	Physician Executive, Integrated Northern Health Facility Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Good care from staff
- Excellent recreation programming
- Residents feel they have a lot of choice in their care
- Residents feel that they know who to go to with concerns and that they are promptly addressed

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Repetition in menu and lack of taste overall in food
- Lack of internet access was a major concern for some residents

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Internet access was requested at several locations and should be looked at across the system
- Making additional spices and flavoring agents could be made available to individualize meals to residents tastes

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Radville Marian Health Centre - 73127  
 Community: Radville, SK  
 Date of visit: August 20, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Karen Earnshaw	Vice President, Integrated Rural Health
• Kelly Fish	Director, Continuing Care
• Lori Tulloch	Director, Primary Health Care
• Jean Morrison	President & CEO, Emmanuel Health

Please describe what is working well as identified through your visit and discussions with families and residents:

- Large geography serviced with young population (births outnumber deaths)
- Stable manager and staff. Good recruitment opportunities
- Two licensed nurses, four CCA on Days; one licensed nurse, two CCA on Nights
- Huddle daily, safety focused, DVM present
- Two quality indicators triggered
- Ceiling track lifts in all rooms
- Relaxed breakfast in place, but food is delivered plated, could be a focus for future improvement
- EMS on-sight – busy service
- Primary Health Care – 3 MDs; 1 NP/1day a week; MH, HC, Primary Health home base
- ER with five multipurpose beds
- Spoke with 2 residents
  - “Pretty damn good” – all my needs are met
  - Feel safe
  - Good variety of activities, can go outside and on outings if they want

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- No secure front doors, access to secured outdoor space is not in location that supports resident use
- Potential to add day support
- Potential to adopt Small House Model
- Staffing mix to support ER & LTC (tried a RN on-call) but function and physical layout make it difficult to support both services within current complement of staff particularly on nights
- Increasing challenge of behaviours





Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Look to deliver PIECES differently
- Falls Prevention Program- could be expanded
- No visible PT – possible vacancy or eliminated funding so further gap analysis required

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Silver Heights Special Care Home – 73785  
Community: Raymore, SK  
Date of visit: July 17, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Christine Senft	Office Assistant
• Lori Bentz	LPN

Please describe what is working well as identified through your visit and discussions with families and residents:

- Carpet has been replaced with linoleum in dining area
- Flooring replaced in bathrooms
- Two new beds purchased
- Resident Rooms are personalized
- Attended the Resident and Family Council meeting. Ten residents/family and staff were in attendance Meetings are held quarterly. Next meeting takes place October 19, 2019
- Upcoming activities:
  - July 19, 2019 - Family/Resident BBQ
  - August - Strawberry Tea and looking forward to the Pow Wow Dancers
  - September – Grandparents tea
- Families appreciate resident artwork being displayed
- The accommodation of late breakfast – lots of choices of beverages
- Suzie-Q cart used for lunch/supper

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Ongoing staffing challenges for nursing
- There is a need more ceiling track lifts



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue with building improvements, including additional flooring replacements
- Continue to see ongoing activities that meet the needs of the residents

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Redvers Health Centre – 73536  
Community: Redvers, SK  
Date of visit: September 3, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Polly Godenir	Community Services Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Pergolas completed and used by residents and families
- Home tries to incorporate BBQ'ing into a summer menu
- Door to courtyard is unlocked for residents as they requested
- Residents requested to have a "KFC" Friday and this has occurred a few times during the summer, also had pizza and Chinese food as requested
- Implemented "Forever in Motion" program through a community volunteer
- Multi-disciplinary care conferencing occurs annually or more often as needed
- Have hosted "paint night" that has included residents, family and community members
- Plans are underway for a 75<sup>th</sup> wedding anniversary celebration at the home in October
- Will be hosting a Primary Care Paramedic Course in partnership with Sask. Polytechnic
- Courtyard has flowers, fairy gardens and fire table
- Tubs in the building are accessed by the Community Bath Program which is available through home care

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- A handi-cap entry button is to be installed on door to courtyard for easier and independent access by residents
- Recruitment and retention of some classifications (i.e. cooks) makes staffing challenging
- Opportunity to improve daily visual management and huddles

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Improve Daily Visual Management to assist in the daily operations of the home
- Continue to proceed with the installation of the handi-cap access button to improve independence of the residents

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Extendicare Elmview - 73551  
 Community: Regina, SK  
 Date of visit: October 20, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Debbie Sinnett	Executive Director, Continuing Care
• Lorri Carlson	Director, Continuing Care
• Brad Havervold	Executive Director, Community Care Branch, Ministry of Health
• Jason Carson	Senior Administrator, Extendicare Elmview/Parkside
• Brooks Brhelle	Director of Care, Extendicare Elmview
• Approximately Twelve Residents	
• One Family Member	
• Recreation Staff	

Please describe what is working well as identified through your visit and discussions with families and residents:

- High level of engagement and involvement of residents in planning, coordinating and participating in social and recreational programs. Also participate in decisions related to the facility, i.e. chose the paint color for the new tub room. Music therapy – volunteer services for group and one-on-one needs, in house choir, art project with volunteer artist, lots of student involvement, opportunities to go shopping, on outings and get out in the community
- Strong friendships feel valued, contributors to programs and services; have something to look forward to everyday, “it is home”
- Good relationships with staff, trust, kindness, caring and interested were key words used
- Excellent food
- Family and Resident information board in place
- Good daily visual management in place – daily huddles, metrics visible
- High scores on the Resident and Family Survey and on the Extendicare Survey

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Infrastructure challenges, work continues with the City of Regina and fire marshal to finalize outside access for smoking area

- Shared rooms are smaller, one four-bed ward room used for long-term care is not ideal
- Quick Response Unit – some challenges with communication with ER, transitions in care and lack of documentation a care and safety concern. In discussion with Program Access to assist in resolving challenges
- Residents would like more access to therapy, such as physical therapist to help maintain mobility and wellbeing
- Infection control – work required with Infection control and long-term care to achieve balance and understanding of 24/7 long term home environment – concerned that some expectations are inappropriate for non-acute, stable environment

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Fire codes and challenges in Regina has a designated Saskatchewan Health Authority lead, and will work with affiliates experiencing similar challenges
- Long-term care planning for future – Extendicare would like to participate in this provincial work, as part of future planning
- Program Access Committee and ER will work with Quick Response Unit to address communication needs on transition and improve flow and transition back to the community.
- Therapy Services – Regina Continuing Care exploring cell model services that can provide outreach support for convalescent and quick response program, assess for potential use in other areas
- Infection control standards and balancing with long term living environment is a common thread for follow up provincially

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Extendicare Parkside - 73550  
 Community: Regina, SK  
 Date of visit: August 8, 2019

Please indicate who attended this visit:

(Name)	(Title)
<ul style="list-style-type: none"> <li>• Sharon Garratt,</li> <li>• Lorri Carlson</li> <li>• Jason Carson</li> </ul>	<ul style="list-style-type: none"> <li>VP, Integrated Urban Health &amp; Chief Nursing Officer</li> <li>Director, Continuing Care</li> <li>Administrator, Parkside Extendicare</li> </ul>
<ul style="list-style-type: none"> <li>• Participated in a Resident Council meeting and individual conversations with residents and family occurred throughout the visit</li> </ul>	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Extendicare Parkside is a 228-bed facility with 34 4-bed rooms, 40 2-bed rooms and 12 single rooms. They operate an 8-bed Transition Unit and an 8-bed Convalescent Unit within their overall bed number.
- As noted in last year’s visit, additional funding was provided in 2017 to add 5 full-time CCA’s 1145-2015 Monday-Friday to respond to call lights, a Resident Care Coordinator on evenings and increased recreation therapy to 6 days per week.
- Additional funding provided from the resident fee increase in 2018 supported staffing they were already providing without budget.
- A group of 8 family physicians manage the majority of the residents. A geriatric psychiatrist provides on-site clinic services every 2 weeks and provides good support in between clinics.
- With the addition of steam carts they have been able to provide relaxed breakfast times as well as some additional flexibility around other meal times.
- At the Resident Council meeting the residents gave positive feedback about the laundry, housekeeping and maintenance departments.
- They receive capital funding support from Extendicare that allows them to keep up the facility by updating paint, flooring and respond to some but not all of the system upgrades (boilers, HVAC, ceiling tracks). They have received some additional assistance from the SHA.

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Discussion at the Resident Council meeting focused on concerns related to managing smoking close to the entries, more diligence required for managing patients with wander guard and requests related to food choices. In the case of the food choices, it was an interactive discussion between management and residents about options and likes/dislikes. It was clear that the management group were taking the feedback seriously and considering the best approaches to respond.
- Adhoc interactions with family members raised some concerns regarding care that are pending resolution with the home administration.
- The provincial resident and family surveys are newly completed and have not yet been made available to Parkside. However, they are preparing for Accreditation with Extencicare Canada and have completed two surveys of their own recently and have received some negative feedback about the number of surveys. They are in process of developing their action plan in response to the feedback and will report back to the next Resident Council meeting.
- The facility is one of the points of entry to the long-term care system resulting in ~200 admissions last year, with numerous internal moves required to fill empty beds. This constant change makes it challenging for residents and staff.
- A number of QI indicators triggered throughout the last year. Corrective Action Plans are developed and implemented, monthly working group meetings also occur with some improvements noted.
- The facility is old and in need of replacement due to pending infrastructure and large system (HVAC) failures. The current design with a large number of 4-bed rooms does not meet current standards of care or resident and family expectations for a home environment.

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Extencicare has submitted a proposal for replacement of the facility and is awaiting a response from the SHA and MoH.
- As a first entry in to long-term care for many individuals the administrative team noted that family expectations are high. When a resident moves in to Parkside from hospital, differences in care approaches between acute care and long-term care cause additional confusion for residents and families (e.g. use of restraints and bed side rails in hospital and not in long-term care). This feedback will be shared with Acute Care services in





order to determine if the care needs to be more consistent or communication strategies need to more clearly outline the rationale for the differences.

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Extendicare Sunset - 73552  
Community: Regina, SK  
Date of visit: September 18, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Andrew Will	VP, Infrastructure, Information and Support
• Kim Skinner	Facility Manager
• Kim Burns	Director of Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents were very appreciative of the care provided by staff in the facility. Residents commented that they like the activity programs and the quality of the food provided. I had the opportunity to interview a husband and wife who were both residents in the facility and they were very appreciative that they were able to share a room together.

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Residents did express concern related to challenges with some of the residents with dementia that are wandering into other resident's rooms.

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The facility uses a software program called "Activity Poll" to track and document activities provided and resident's needs and abilities to participate in different activities. This is a best practice worth sharing. In addition, the facility should be commended for their program related to Restorative Care.

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Regina Lutheran Home - 73556  
 Community: Regina, SK  
 Date of visit: September 4, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Sharon Garratt	VP, Integrated Urban Health & Chief Nursing Officer
• Andrea Deregowski	Executive Assistant, Integrated Urban Health
• Alan Stephen	CEO, Regina Lutheran Home
• Lacy Renauld,	Director of Care, Regina Lutheran Home
• Leland Sommer	Nurse Practitioner, Regina Lutheran Home
• Ryan Bahan	Director Intergenerational Care, Regina Lutheran Home
• Connie Fuessel	ED, Assisted Living, Regina Lutheran Home
• Alicia Seitz	Recreation Leader, Regina Lutheran Home
• Manoj Fernandes	Manager Support Services, Regina Lutheran Home
• Spoke with elders and families following one of their recreational activities. In addition, individual conversations with elders and families occurred throughout the visit.	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Regina Lutheran Home is part of a campus of services that includes independent suites, assisted living, infant/child care, home care, and long-term care. All of these components work in sync. One benefit of the campus is that a spouse living in attached housing is able to join their spouse in long-term care for daily meals.
- The majority of rooms are single rooms, so admissions to the home are usually from another care home or hospital.
- They have implemented the “House” concept with four houses (three 16-bed houses and one 14-bed house). Consistency of care is achieved through staff assignments and is beneficial for both residents and staff. The positive interactions between elders and staff were evident throughout the visit.
- Nurse Practitioner working with the physician group provide a proactive approach to care. The NP completes quarterly medication reviews to ensure residents are on the appropriate medications resulting in 87% of residents on eight or fewer medications and 62% on five or fewer medications.
- The Board has committed annual operating funding to support setup for more meal delivery options (breakfast made to order until 11am, lunch and supper on a six-week

cycle from the kitchen with alternate options available).

- Recreation programming has expanded to include weekend and holiday activities. They also have a partnership with the Regina Symphony Orchestra for music therapy.
- They are fortunate to have an auxiliary that supports activities and fundraising, although they acknowledged that the volunteer base is aging.
- Family Matters group coordinate a potluck once/month.
- They have pets that live at the home (cat and dog) and are integral members of the care team providing support to residents.
- Daily visual management tools are present. The leadership team are clearly very engaged and passionate about their work.

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- The tubs are at the end of life. Residents are bathed once/week. The tubs are on the SHA capital equipment request list.
- No ceiling tracks in rooms. Portable lifts are used.
- Demographics are changing. People are living in the community longer and come in with greater care needs and less mobility, which adds to the care workload.
- Physical infrastructure of the aging building is a challenge in many areas. Many space challenges exist including supplies/linen and creating infection control challenges. Although storage space is a challenge, hallways are free and clear of equipment.
- There is no equipment for bariatric residents.
- All mattresses have been updated to meet recommendations from the Fire Marshall.
- Recruitment and retention of casual staff is a challenge.
- Families raised a concern that staff did not seem to know what to do for a recent tornado watch and lighting outside is poor. These concerns were addressed by the leadership team noting that they are currently updating emergency preparedness codes and will be rolling out one per month with training sessions. The lighting concerns were also noted for follow-up.

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The Regina Lutheran Home has put forward a proposal for replacement of the facility and is awaiting response.
- A number of opportunities for further partnership were noted during the tour. For example, a willingness to collaborate with the SHA to meet some of the specialized needs of elders in the community (palliative, bariatric).

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Pioneer Village - 15183  
 Community: Regina, SK  
 Date of visit: September 27, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Dr. Rashaad Hansia	Physician Executive, Integrated Urban Health
• Andrea Deregowski	Executive Assistant, Integrated Urban Health
• Debbie Sinnett	Executive Director, Continuing Care
• Terra Olynick	Director, Continuing Care
• Met with the Family and Resident Council at the end of the tour. The Council meets every 6-8 weeks.	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Pioneer Village consists of regular long-term care and three specialized programs:
  - Dementia Care Unit (58 beds - 14 closed = 44 open)
  - Complex Behavior Unit (23 beds - 8 closed = 15 open)
  - Mental Health Unit (61 beds - 24 at RPV and 37 at WRC)
  - Two floors and a few beds on other units (total of 170 beds) have been closed due to mold, asbestos and infrastructure concerns
- Many of the people we met reiterated that staff deliver great care despite the challenges. They work with the residents to ensure their routine works for them and in the past year have implemented a “relaxed morning” schedule for residents
- Terra Olynick, Director Continuing Care, has been seconded from her position to focus on Pioneer Village during this period of change
- Care conferences are well received and continuing care aides, recreation therapist, dietician, pharmacist, occupational therapist and physio therapists have been added to the conferences
- A Nurse Practitioner (NP) is available Monday-Friday. The NP has built relationships with physicians, pharmacy and rounds on the units. This has resulted in quicker response to resident concerns and less hospital transfers
- Food is cooked by food services and plated by care staff to make food more appealing

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Staff turnover - residents and families are feeling anxious and stressed because of the uncertain future of the current structure
- The Council would like to increase consistency of service providers for residents
- Staff expressed a desire for more updates on the future of the facility stating that the uncertain negatively affects the residents
- Due to the age of the facility and design constraints at the time, tub rooms are small, and in some areas require curtains across the hall to provide privacy
- Ventilation is a concern due to the age of the HVAC system and repairs are apparently increasingly difficult with concerns that failure may result in a costly replacement. The boilers are 55 years old and well past life expectancy
- The yard needs to be cleaned up and could be made more appealing
- The use of antipsychotics without a documented supporting diagnosis may be trending up after recent improvements in prior years
- Staff turnover has resulted in a lapse in training. There is a renewed focus on transfer-lift-reposition (TLR) and gentle persuasive approach (GPA). The Clinical Nurse Educator works with the Nurse Practitioner to set up new education as well as updates. Nurses on shift during evenings, nights and weekends can provide training as well as videos which are available
- Daily visual management has not been used consistently in the last 18 months but has been identified as a priority area. A Manager board, however, is being used. The Family and Resident Council has requested a family board for communication and these now are set up on each unit

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Regina Pioneer Village has historically provided core services including long-term care and specialized units for complex and challenging residents who are not easily accommodated elsewhere. The co-location of assisted living facilities has also supported the feeling of a "village" rather than a residence. This is a testament to this concept and a lesson for future developments
- The SHA is working with the MoH on the future plans for the services provided at RPV. More details will be provided to staff and residents as information becomes available

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Qu'Appelle House - 73555  
 Community: Regina, SK  
 Date of visit: July 25, 2019

Please indicate who attended this visit:

(Name)	(Title)
<ul style="list-style-type: none"> <li>• Sharon Garratt</li> </ul>	VP, Integrated Urban Health & Chief Nursing Officer
<ul style="list-style-type: none"> <li>• Lorri Carlson</li> </ul>	Director, Continuing Care
<ul style="list-style-type: none"> <li>• Bev Desautels</li> </ul>	Administrator/Director of Care, Qu'Appelle House
<ul style="list-style-type: none"> <li>• 29(1)</li> </ul>	Board Chair, Qu'Appelle House
<ul style="list-style-type: none"> <li>• Individual conversations with residents and family members occurred throughout the visit</li> </ul>	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents and families consistently voiced their appreciation for the home and their care. Many indicated that it was considerably better than other places they had resided previously.
- The resident and family comments are consistent with the 2019 resident and family survey results where 100% of the responding residents indicated that overall this is a good place to live.
- Qu'Appelle House is a level 2 care facility with 34 private rooms. Residents must be able to walk to the dining area for meals, so cannot be wheelchair dependent. The site also contains independent living suites whose residents can purchase meals from the dining room.
- They have made arrangements with a physician who is willing to take on residents, attends to the home weekly and is responsive to calls when medical care is required. Many of the residents have chosen to take this physician as their family physician due to the convenience and responsiveness.
- The board and administration have done a very good job of maintaining the 52 year-old building. They recently renovated the kitchen to install all stainless steel surfaces and have an annual program to update rooms.
- Qu'Appelle House met 93.3% of the standards and ROP's during the most recent Accreditation survey, in large part due to the amount of work they have done to ensure that all of their policies and practices align with the standards and are consistent with those in other Special Care Homes.
- They have stable staffing with very low turnover. They cross-train staff to provide multiple functions, thereby creating as many efficiencies as possible.

- The facility has a well-developed structure of daily staff huddles, weekly, monthly and quarterly Quality Improvement and Quality Assurance monitoring. A high level of compliance to hand hygiene was clearly demonstrated by the residents and staff.

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Medication management on nights continues to be challenging due to lack of nursing presence on nights. They have extended the evening LPN to 2200 and some residents are able to self-administer prn medications when needed.
- They find it challenging to meet the care requirements within current funding levels. The greatest challenge being the lack of nursing support of nights. They also bring in a casual nurse to support each admission, physician visits and audit work.
- The ability for the board or auxiliary to fundraise continues to decline due to increasing competition and the age and number of their volunteer base.
- They identified a need to replace their generator.

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The need for a generator will be identified in the capital equipment request process.
- Information on staffing resources will be considered within the work being completed by of the SHA and Affiliates Steering Committee overseeing the development of the Principles and Services Agreement template.



### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Santa Maria Senior Citizens Home - 73559  
 Community: Regina, SK  
 Date of visit: September 20, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Debbie Sinnett	Executive Director, Continuing Care
• Lorri Carlson	Director, Continuing Care
• Kelly Chessie	Executive Director, Santa Maria
• Several residents and staff participated in the Gemba when touring the Care areas	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Recreation and social programming is appreciated, many positive comments
- Several residents expressed appreciation of the staff, kind and caring
- Sense of a faith community, a preferred facility with waitlist, residents appreciate these services
- Strong focus on dementia care, program adjustment over the last year to meet needs that are more complex
- Staff appreciation – chili day where staff serviced by the management team, board on display by elevator for thank you and appreciation notes
- Executive director on the gemba daily, conscious effort to connect with staff, residents and families
- Volunteer recruitment and opportunities to engage with the community noted
- Home has become non-smoking on the property, working through transition for few remaining residents who smoke
- Shared Human Resources resource with two other homes to meet service needs; this is working well

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Facility infrastructure needs and capital funding, with roof and skylight issues. Process is confusing and time consuming. Lack of clarity on funding available for projects
- Staffing and scheduling challenges – resulting in some overtime and shortages, staff concern expressed – Scheduler coverage now in place and working through onboarding and knowledge gaps
- Dementia Care – program expansion opportunities, would like to become a centre of excellence, requires further discussion with SHA, as some capital and staffing costs



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Capital planning process – work is required to better support information sharing, process work standards and approval processes in the Saskatchewan Health Authority
- Program development opportunity for dementia care – a review of long-term care and transitional care services in Regina and bed utilization is planned for January 2020 and Santa Maria will be included, noting interesting in expanding dementia care services
- Opportunity for Daily Visual Management growth and use to support daily needs

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Wascana Rehab Centre Extended Care - 73501  
Community: Regina, SK  
Date of visit: October 2, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Debbie Sinnett	Executive Director, Continuing Care
• Shauna Leonard	WRC Extended Care - Transition lead
• Kaitlyn Sterner	Manager Unit 3-5 Veterans program
• Melvin Hipolito	Manager Unit 2-5 LTC – complex care
• Spoke with residents on Unit gembas and met with two resident and two family members for more detailed conversation on care	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Veterans Program – high level of social engagement, entertainment, sensory programming, workshop activities, lots of family involvement, Pub Social in progress during tour
- Enjoy access to solarium, gardening program, use of concourse for larger events
- Overall please with high quality of care, nursing and physician support
- Quality Indicators – under targets and provincial average, ongoing work to continually improve
- Targeted work on Falls- provincial falls project implementation site
- Trialing use of weighted blankets for dementia care and to reduce up at night
- Families noted staff/managers are responsive to needs, work to resolve concerns quickly, meet with family as needed. Excellent care provided, one client is 10+ years, continuity and maintaining a “home” is key
- Good management of concerns, timely response
- Open visiting, family can call or be here as much as they want, some stay overnight routinely – feel welcome, trusted, privacy respected

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Frequency of room moves to meet new admission needs, due to shared rooms, antibiotic resistant organisms, etc., but have significant impact on the resident. Additional engagement of patient safety/advocate as resource and trying to balance needs and impact
- Palliative Care – individuals are transferred here when discharged from hospice, but no

defined unit/program area with informed, knowledgeable and consistent staff

- Parking challenges for family visiting, made worse over the summer with construction
- Finance process can be challenging. There should be a way to do direct third party billing, so family does not have to pay then collect back, as this is financially challenging
- Concern re: VAC program changes and reduction in eligible Veterans, loss of Red Cross program after this year

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Resident move process and flow – ongoing review as part of overall program access process in Regina area and provincially – work underway
- Program beds review for long-term care and transitional care will include Wascana Rehab Centre Extended Care services for future planning for needs (palliative)
- Participation in provincial falls A3 work as implementation site – ongoing for 2019/20 and 2020/21

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: William Booth Special Care Home - 73558  
 Community: Regina, SK  
 Date of visit: October 29, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Debbie Sinnett	Executive Director, Continuing Care
• Lorri Carlson	Director, Continuing Care
• Ivy Scobie	Executive Director, William Booth Special Care Home (Salvation Army)
• Gemba through convalescent care, common area, adult day program and one-on-one with a resident	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Preferred facility, excellent reputation and long wait list. Resident and family surveys done at each care conference, so 100% participation, excellent feedback, high satisfaction levels, culture is key in supporting same
- Access to community-based programs is important, residents enjoy going out
- Engaging in meaningful activity is important for residents – assist with laundry, project work like refilling containers for EMS, assisting with physio stats collection
- Accredited via Salvation Army National and also through Saskatchewan Health Authority processes
- Adult Day program services about 100 clients on days and evenings – positive feedback, supports individuals in remaining in community
- Daily visual management, huddle twice daily, document same and take attendance, themed days, i.e. Safety two times weekly, and staff take turns leading
- Resident and family information board, good concern handling processes
- Excellent recreation and social programming, valued by residents
- Hospice is fully utilized, positive comments on quality of care and support

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Changing resident/client profiles, do not always fit the Regina program guidelines and concern of increased risk i.e. convalescent program used for young adults with drug and street behaviors, placed with vulnerable seniors

- Capital project costs and approvals – process is confusing, time frame is long and no information on standards for what costs are covered i.e. 50%, 100%
- Funding concerns – financial risk, funding process requires review, orientation and relief costs, staffing costs, subsidized by Salvation Army, not sustainable
- Service support – Human Resources, employee health, etc., is currently not accessible in Regina
- Infection Control – work required with Infection Control and long term care to achieve balance and understanding of 24/7 long term home environment – concerned that some expectations are inappropriate for non-acute, stable environment
- Need to review guidelines for programs at WBSCH, as client needs changing and noting additional risk, pressure on meeting increased care requirements. May need to look at service/program changes
- Fire marshal – requirements related to seasonal décor, awaiting guidelines from Saskatchewan Health Authority, Regina, due to issues last year across long-term care
- Resident and family survey - did well on survey but noted the absence of a not applicable category for use; this would be a good change as sometimes the question does not impact that resident's needs and would like a way to reflect this

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Capital Planning process requires additional work related to affiliate process and access to funding, similar to comments across long-term care
- Program review required for services – this aligns with the Regina area review of program beds and services targeted for January 2020
- Infection Control standards and balancing with long-term living environment is a common thread for follow up provincially
- Operational funding and services support– being addressed through provincial work on the Principles and Service Agreement with affiliates

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Grasslands Health Centre - 73132  
Community: Rockglen, SK  
Date of visit: October 2, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Dr. Kevin Wasko	Physician Executive, Integrated Rural Health
• Cara McDavid	Director, Primary Health Care
• Kelly Fish	Director, Continuing Care
• Lisa Cairns	Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Good nursing and care. Feel listened to
- Food is good. Has relaxed breakfast
- Compliments to staff about care and food from family
- All rooms have ceiling lifts
- All quality improvement met. No triggers

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- No daily huddles! No visibility walls
- Wanting to know about “Happy Hour” rules
- Part-time activities working. Activities done by 2:30 p.m. (8:00 a.m. – 2:30 p.m., 7 days per week). Concerned about ability to recruit activity worker who is also a continuing care aide
- Wondering about return in Service Agreements
- Unsafe courtyard – being fixed
- No respite or convalescence
- Gate drawn around dining room
- Front parking lot wheelchair ramp
- Kitchen waste because mass purchasing

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- No collaboration with Coronach for palliative. Accessing palliative bed in Rockglen is a hassle
- Home care teams are in siloes
- Bed placement in Five Hills is too bureaucratic
- Alternate Level of Care and access centre. First available bed policy
- Nurse B is Monday to Friday – mix of 8 and 12 (6 hours of Admin dedicated)
- One continuing care aide x 12 hours /one registered nurse x 12 hours - 24 hours
- Public Health in small space separate from Primary Health Care



### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Rosetown Health Centre - 73567  
Community: Rosetown, SK  
Date of visit: September 13, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- Christina Denysek Executive Director, Continuing Care
- Ruth Miller Director of Primary Health Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- Staff very caring
- Meals come from the centralized kitchen for the Integrated facility
- Meals delivered in carts and dished up and served for residents in the houses
- Great support from community volunteers for the outdoor flowers and weeding

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Nurse call system needs to be addressed
- Opportunities exist for enhancing the dining experience
- Family raised concerns about the shortage of staff
- Family concern re: centralized scheduling does not seem to work as efficiently as if scheduling done in house
- Would like windows washed outside
- Outdoor maintenance could be improved and more attention given to it from the maintenance team
- Inquiry about the front door locking and beeping continuously until the switch is manually reset
- Concerns raised within the kitchen area including the air conditioning and there seems to be a continuous leak under the dishwasher
- Concerns raised in the main entry area with the fireplace and how it blocks the only common activity area



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to work on improving the WanderGuard and the maintenance concerns in the kitchen
- Seek to create plans to address the concerns raised

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Mennonite Nursing Home - 73599  
Community: Rosthern, SK  
Date of visit: October 8, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- Lisa Major Executive Director Continuing Care North East
- Joan Lemauviel CEO, Mennonite Nursing Home
- Karen Chaskevich Director of Care, Mennonite Nursing Home
- Dalene Newton Executive Director Continuing Care Saskatoon Urban
- Brad Havervold Executive Director, Community Care Branch, MoH
- Five Residents
- Three Family Members

Please describe what is working well as identified through your visit and discussions with families and residents:

**Residents:**

- Everything! This is a great place to live!
- The bosses are good
- The staff are all very good
- I am proud to be here
- Food is mainly good
- The auditorium is a great place for activities
- We are very lucky. We are warm and comfortable, what's to complain about?
- We enjoy playing Bingo!
- This home is a very decent place
- Would like to have more "chores" to do
- We can choose when we go to bed and when we get up

**Families:**

- One family member shared that her husband has been here for 11 years
- The space is nice
- There seem to be many activities for the residents
- Special Events are fun and well attended i.e. log cabin suppers, Fall Supper
- Mother feels loved here
- Our family is happy to have our parents here
- The Mennonite Nursing Home is very accessible

- Food is good
- “I like to spend time with my wife here.”
- One resident stated it would be nice to have a workshop. Likes to keep busy

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Worker’s need to be less task oriented
- Take the time to get to know the residents
- Would like to see more activities
- Food is mainly good

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Director Continuing Care North East for Melfort & Area, Sandy Weseen; CEO, Joan Lemauveil; Director of Care, Karen Chaskevich and Executive Director of Continuing Care, Lisa Major to look at patterns of issues that may require follow-up
- Discussion of issues with the family or resident councils will occur. Escalation to leadership done as needed
- Feedback provided will be provided to leadership to help inform improvement efforts in Continuing Care

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Lakeside Manor Care Home - 73777  
 Community: Saltcoats, SK  
 Date of visit: August 22, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Karen Earnshaw	Vice President, Integrated Rural Health
• Stacey Pfeifer	Recreation Coordinator
• Lorie Mokelki	Director

Please describe what is working well as identified through your visit and discussions with families and residents:

- 30 bed care home, huddle three times a week, afternoon care planning
- Manager 3 days/week (2 days in Yorkton); 4 CCA, 1 licensed nurse Days; 1 CCA, 1 LPN Nights
- KBro laundry supplies
- Clean fresh building, well maintained good space and nice grounds
- Relaxed breakfast with increase in resident choices
- Pharmacy participates in med review
- Newer building (1986) with recreation five days/week
- Lots of community support – volunteers and fundraising
- Ceiling track in majority of rooms. No curtain in hallway. Several adjoining rooms recently had TLR update, nice bright rooms
- Met with Family
  - Wife has lived here for two years, entered into LTC at Langenburg – care is very good, excellent staff; many regular activities for families and meals are very good
  - Local pastoral care leaders
  - “I can go home and sleep knowing my wife is looked after”

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- New equipment in kitchen needed and on capital list
- Struggle with ‘churn’ of licensed staff – Yorkton is close and limited relief and casual
- No Daily Visual Management – linked to QIs. Care team meets with manager. No trigger to CAP
- Survey results not distributed as of yet.
- Only one licensed staff in building. No Nurse B or ‘regular charge’

- Met with Family
  - Noted 'grind Tylenol really fine' but wondered if Pharmacy could supply it in liquid. Shared with nursing staff to review
  - Food portions are small

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Recent Critical Incident identified Nursing Assessment Tool – in development with MD (draft in trial with several facilities)
- Focus on "Living at Risk" tool and conversation development
- Would be difficult to turn into small houses

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Central Haven - 73799  
 Community: Saskatoon, SK  
 Date of visit: September 3, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Dalene Newton	Executive Director, Continuing Care, Saskatoon Urban
• Andre Moss	Director, Continuing Care 2 – Saskatoon Urban
• Roberta Gallagher	Administrator
• Dolores Campbell	Director of Care
• Suellen Beatty	CEO, Central Haven
• Kimberly Yelland	Administrative Assistant, Executive Director

Please describe what is working well as identified through your visit and discussions with families and residents:

- When entering Central Haven Special Care home you immediately notice how bright and open it is. The entrance is open to the dining area where there are large windows allowing for lots of natural light
- Central Haven has a total of 60 long-term care beds
- Central Haven fundraised and they were able to add an alcove for families to sit and visit
- The kitchen staff prepares all their meals in-house, and they offer two different meal options
- The occupancy rate at Central Haven is very good
- We were able to speak to a few residents who said this is a very nice place to live. They love the comradery, everyone here is very happy and they treat you like a person not a resident
- They recently received board approval to build a new deck for the residents to enjoy. The new outdoor deck will be accessible for residents with wheelchairs; the current deck is not wheelchair accessible
- Central Haven has many partnerships with schools in the community. The school children visit the home often, the residents love this
- This year they hosted a three-day Kindness Camp. The camp included residents, staff, children, and grandchildren. The camp was very popular; they are hoping to host this next year as well
- They have been able to support quite a few residents who have moved back into the community
- There is very low staff turnover. The staff here is very passionate and invested in the work they do

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- The home has a few physical challenges with the building. The dining room is quite small making it difficult to fit all the residents, especially with the wheelchairs. The windows in the home are showing their age, with most of them having condensation and are due for replacement
- They are currently working on their infection prevention control policies and procedures

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Central Haven home is an affiliated home; they have a contract with the SHA to provide care and service to residents
- The Central Haven leadership team has been successful in transitioning individuals back into the community. We had a discussion about the SHA Health Networks and how the network teams could support these transitions in the future
- Central Haven administration team is a good partner to work with and the SHA is pleased with the care provided to residents



**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Circle Drive Special Care Home - 73817  
 Community: Saskatoon, SK  
 Date of visit: August 29, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Dalene Newton	Executive Director, Continuing Care – Saskatoon Urban
• Andre Moss	Director, Continuing Care 2 – Saskatoon Urban
• Clint Kinchen	Administrator
• Kimberly Yelland	Administrative Assistant, Executive Director

Please describe what is working well as identified through your visit and discussions with families and residents:

- When you enter Circle Drive Care Home, there is a beautiful waterfall feature that is decorated with bright and cheery décor. The décor throughout the home changes with the seasons
- There are three wings with a total of 53 residents. Each wing has their own color of lighted handrails, this helps the residents find their rooms. The resident rooms are a nice size and have large windows that are lower so residents are able to see outside easily
- The rec room has recently been expanded making it easier to host larger choirs and entertainment
- One of the solariums is currently being renovated as well. They are adding new windows and a new roof; this will help keep it warmer in the winter months
- There has also been a new courtyard added for the residents to enjoy
- The home is in the process of adding a Serenity Room. There will be a Nordic Chair; this will help residents who are distraught. The chair can move in a rocking motion and is able to play music having a calming effect
- There is art work displayed throughout the home that has been painted by residents
- The dining area is nice and spacious. There are very large windows making it feel very open. It is decorated exactly like a home would be making it feel very warm and comforting
- The kitchen has new convection ovens; these ovens are able to cook hundreds of meals at one time
- The kitchen staff tries very hard to accommodate resident's food preferences
- They have a hydration program for residents and it is working quite well
- There are three tub rooms, all have ceiling track lifts. One of the tub rooms has a television and sound system that the residents enjoy. The home prefers to use Penner

- tubs as they are able to receive parts locally when they need repair
- The administrator mentioned that the staff here are wonderful and they have very low staff turnover
  - In the 33 years this home has been operating, there have only been five transfers out of Circle Drive Care Home. This speaks volumes to the care that is provided here

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- The home is waiting to replace their nurse call system. The system they have is outdated and needs to be repaired quite often
- Administrator is concerned about the new insurance program. They recently had an incident that will need to be an insurance claim. They are having some issues navigating this new process
- Next year the home will need a new air conditioner; they are hoping to receive funding for this

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Circle Drive Special Care Home is an affiliated home; they have a contract with the SHA to provide care and service to residents
- Information continues to be provided to the Special Care Homes (SCH) regarding the SHA Administration Information Management System (AIMS), which includes an insurance program that the SCHs can join if desired
- The SCHs were included in the SHA Capital Equipment process in 2019-2020 and a comprehensive list of needs was collated. Several beds, ceiling track lifts, and tubs will be purchased for the SCHs and be distributed to those with the greatest need. With review, the identified air conditioner may be appropriate to be put on the SHA capital equipment list for 2020-2021
- The administration team at Circle Drive Special Care home is a good partner to work with and the residents are grateful for the care received

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Saskatoon Convalescent Home - 73813  
 Community: Saskatoon, SK  
 Date of visit: August 1, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
<ul style="list-style-type: none"> <li>• Sharon Garratt</li> <li>• Dalene Newton</li> <li>• Nadine Reid</li> <li>• Donna Bleakney</li> <li>• Paige Ens</li> </ul>	<ul style="list-style-type: none"> <li>VP, Integrated Urban Health&amp;Chief Nursing Officer</li> <li>Executive Director, Continuing Care</li> <li>Administrative Assistant, Integrated Urban Health</li> <li>CEO, Saskatoon Convalescent Home</li> <li>Director of Care, Saskatoon Convalescent Home</li> </ul>
<ul style="list-style-type: none"> <li>• Individual conversations with residents and families occurred throughout the visit as well as an in-depth and private conversation with four residents and one family member</li> </ul>	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Saskatoon Convalescent Home is a pleasant, inviting and well-maintained facility. It includes two floors, with 60 single rooms including 1 respite bed and a Community Day Program.
- The courtyard is a secured space, with fresh vegetables and beautiful greenery in the gardens that the residents maintain.
- The Namaste Program is an International program for end-stage dementia residents. Approximately 2 hours of daily sensory immersion are provided including hand rubs, hair and nails, doll cuddling, soothing music and smells. Research, staff, and families have identified that the program improves the quality of life for these residents.
- They are strong in end of life and Palliative care and utilize community Paramedicine.
- Saskatoon Convalescent Home is currently involved in a U of S Research study with Australia and the University of Alberta regarding the benefits of keeping residents in their home as an alternative to going to hospital.
- The staff create a team atmosphere in the home, where all take part in portering the residents including housekeeping and kitchen staff. All staff know each resident and call them by name.
- They have an active Family Council that meet regularly as well as a Resident Council who have spent considerable time to review and alter the menu options at their home. There are two choices for every meal and as stated by the residents, the food is better than previously.

- They are currently increasing CCA coverage during evenings without additional funding, due to an 80% decrease in overtime spending as well as a 60% decrease in sick time.
- Activities for the residents include a daily exercise program to maintain resident mobility.
- A physician attends the home on a weekly basis to attend to resident needs. Varsity Dental visits on a regularly as well as the podiatrist. They have an onsite hair salon.
- They have incorporated extra low beds for some residents to prevent falls and have the Supportive Care Project Coordinator weekly meetings to review falls and medication errors.
- Relaxed breakfast allows residents to awake on their own schedule and remain on the floor of their room. During lunch and supper, the residents congregate to the main eating area on the main floor. Snacks are provided in the common area on each floor as well as food cart service.
- This home has a strong relationship with the Caswell School. An example of this is the kindergarten graduation, which recently took place at the home.
- The next update of the resident and family survey for this facility is due in 2020.
- The facility stays Accreditation ready by completing the self-surveys and working on areas requiring improvement.

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- It is difficult to retain casual Registered Nurses. They utilize Nurse Next Door as necessary.
- A concern was raised by a resident that at times they wait too long for attention when asking for assistance, especially during shift change and meal times. One of the residents raised a very valid point. The more physically challenged a resident is, the more dependent they are on the care providers to meet their personal care needs. These individuals find delays and gaps in care more challenging because they have no option beyond waiting for a response. There are some residents that are able to do more for themselves and are able to time their requests for when they know the care providers are less busy.
- The residents enjoy the activities provided i.e. movies, music entertainment, and would appreciate evening and weekend activities as they feel it is lacking during these times, particularly on long weekends.
- Residents identified a concern that staff sometimes communicate by shouting down the hall to each other. This issue was identified to the administration and they are already working on alternative means of communication.

- Storage is a concern, (the facility does not have a basement) and extra wheelchairs etc. are in the halls and need to be moved during exercise class.
- There are currently 23 ceiling track lifts in this home with approval for more this year from the SHA capital budget.
- Another improvement suggestion from the residents would be consistency of care providers in order to get to know the resident more in order to provide the best care.

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The home is reaching out to other providers to see if there is interest in spreading the Namaste Program to other facilities.
- Recruitment and retention challenges related to RN's needs to be considered as a system-wide issue in order to identify collaborative solutions.

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Extendicare Special Care Home - 73803  
Community: Saskatoon, SK  
Date of visit: September 18, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Dalene Newton	Executive Director, Continuing Care, Saskatoon Urban
• Andre Moss	Director, Continuing Care 2 – Saskatoon Urban
• Ron Parent	Regional Director, Extendicare
• Peggy Fofonoff	Director of Care
• Kimberly Yelland	Administrative Assistant, Executive Director

Please describe what is working well as identified through your visit and discussions with families and residents:

- The exterior of Extendicare has recently been updated giving the building a more modern look
- Upon entering the home you enter into the “hub” of the building. This is where residents spend most of their time, whether it be watching TV or joining in one of the many activities
- This home is pet friendly. They have a dog that visits often, the residents quite enjoy this
- When welcoming a new resident, they have a decorative hanging that they place on the new resident’s room door. This lets the other residents know there is someone who has recently moved in
- There is a Small Acts of Kindness Board where residents and staff can give credit to others
- We were able to speak to a resident who said the staff here is excellent, and they enjoy the food
- The kitchen offers an alternate choice for every meal; this is very popular with the residents
- All the doors in the home are secure. There is also a secure patio area that has recently been updated. The patio area also has garden spaces for the residents
- The floors throughout the home have recently been updated
- The regional manager also mentioned they appreciate the support they receive from the SHA and that it is a great relationship

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- There are some physical challenges with the building. Only 20 of the 82 long-term care beds are in private rooms. Lack of private rooms seemed to be the main comment from the Resident and Family Experience surveys
- Staffing has been an issue for them, especially with short call. They have implemented a four-step attendance management system; so far, they have seen a reduction in sick time
- There has been some concern from families regarding the response times to call bells. They are investigating these concerns individually

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Extendicare is a designated health care organization and has a contract with the SHA to provide care and service to the residents
- The physical layout of the building, with many of the rooms being four bed-rooms, creates challenges for residents when they are sharing with several people. The SHA continues to support this home with resident placements and full utilization of the beds
- The Extendicare administration team is currently engaged in discussions with the SHA regarding increasing the number of respite beds at Extendicare
- The SHA continues to support Extendicare to maximize the utilization of their bed capacity

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Luther Special Care Home - 73806  
 Community: Saskatoon, SK  
 Date of visit: July 18, 2019  
 Please indicate who attended the visit:

(Name)	(Title)
<ul style="list-style-type: none"> <li>• Sharon Garratt</li> </ul>	VP, Integrated Urban Health & Chief Nursing Officer
<ul style="list-style-type: none"> <li>• Andre Moss</li> </ul>	Director, Continuing Care
<ul style="list-style-type: none"> <li>• Nadine Reid</li> </ul>	Administrative Assistant, Integrated Urban Health
<ul style="list-style-type: none"> <li>• Vivienne Hauck</li> </ul>	Administrator
<ul style="list-style-type: none"> <li>• Ivan Olfert</li> </ul>	Operations Lead
<ul style="list-style-type: none"> <li>• Individual conversations with residents and companions occurred throughout the visit</li> </ul>	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Luther Special Care Home is a spacious home, with a kind and appealing atmosphere.
- This home includes a secure unit for 49 residents (some shared rooms, and some private rooms) in the original 1955 building as well as a newer addition with 3 floors. There are 40 residents residing on each of the first two floors with the 3<sup>rd</sup> floor comprised of a salon, therapies, as well as a Day Program. A pool is located in the building for the residents that is also utilized by the Kinsmen Children's Centre
- Renovations have taken place including a refresh of the 1<sup>st</sup> floor dining room, with calming instrumental music that plays in the background
- The courtyard is an enclosed space, shared between the Luther Special Care Home and Luther Tower (an attached senior's complex). There are walking paths and a beautiful newly renovated BBQ space, provided by generous donations from their foundation. The raised planters are filled with flowers and vegetables the residents have grown. Many tenants from Luther Tower mingle with the residents and also volunteer their time at the Care Home
- Luther Special Care home has been recognized for its efforts in promoting safety. Their focus is on prevention. They have OH&S, TLR and Violence Prevention Committees, which identify hazards before they become incidents, and assign a person to resolve them. This work is commendable and the management and staff should be very proud of its positive results
- Luther Special Care Home has a strong partnership supporting student placements from the U of S as well as Saskatchewan Polytechnic



- The next update of the resident and family survey for this facility is due in 2020, so there was no new information for this tour

Please describe areas of improvement as identified through your visit and discussions with families and residents:

- Due to the increasing age of the building, Luther Special Care home has infrastructure challenges including incurred water damage due to issues with the roof and burst pipes in a few walls. Currently the chapel as well as four resident rooms are not in use. Management is currently working with the SHA to develop a plan for capital funding to support resolution of these issues
- The Nurse Call system requires upgrading and has been identified on the SHA capital equipment list. The SHA capital projects team is working to resolve this issue.
- A concern was raised by one of the family members regarding staffing ratios as the residents may wait a lengthy time for service
- Currently 54% of the resident rooms have ceiling track lifts
- A resident spoke about food choices and offered the suggestion that at times food was placed on plates and not eaten therefore going to waste. She proposed that instead, if the resident has declined the item, over time the staff would recognize what types of foods were not preferred and could alter the menu accordingly
- We had a good discussion about the validity and process regarding the current QI indicators, Corrective Action Plans and results
- Concerns were voiced with the capital equipment process, whereby the homes were provided funds for specific items, which may or may not have been their highest priority. The recommendation was to provide more flexibility for the Home to determine their priorities

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The feedback about the QI indicators will be provided to the Quality/Compliance working group of the SHA and Affiliates Steering Committee overseeing the development of the Principles and Services Agreement template
- Luther Care submitted a proposal to the SHA to move 50 dementia beds to a new Dementia Village in Stonebridge
- Feedback about the capital equipment process will be relayed to the appropriate leaders in the SHA

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Oliver Lodge - 73809  
 Community: Saskatoon, SK  
 Date of visit: September 27, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Dalene Newton	Executive Director, Continuing Care – Saskatoon Urban
• Andre Moss	Director, Continuing Care 2 – Saskatoon Urban
• Brandon Little	Administrator
• Gayle Penner	Director of Care
• 29(1)	Chair of Board
• 29(1)	Chair of the Resident and Family Council
• Kimberly Yelland	Administrative Assistant, Executive Director

Please describe what is working well as identified through your visit and discussions with families and residents:

- The entrance of Oliver Lodge is very warm and inviting. There is lovely décor throughout the home that changes with the seasons
- The home is very clean and looks quite modern
- Oliver Lodge has a total of 139 long-term care beds
- The rooms here are all private with their own bathrooms
- Outside every room there is a cabinet where residents can display items that are special to them
- There is a new Director of Spiritual Care at Oliver Lodge that will be available from Sunday to Thursdays
- They are currently renovating a day room. This will be a place where residents and family members can watch TV and have a snack
- There are a number of windows that have been updated throughout the home
- Oliver Lodge has several courtyards; one of them has a screened in area where residents and families are able to sit and visit
- We were able to speak with a family member who is also the chair of the Resident and Family council. They are very happy with the care their family member is receiving at Oliver Lodge. She is quoted as saying “The staff here is wonderful and they all work together as a team.”
- There is also an onsite dentist and hygienist that comes to the home
- Oliver Lodge is connected to Oliver Place, which is an apartment building that offers assisted living. There is a lounge that connects the two buildings; this area is available to everyone. Some residents of Oliver Place also volunteer at Oliver Lodge

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Oliver Lodge leadership team is currently working on a communication plan. They have hired a facilitator to help build communication between staff, residents, and family members
- Oliver Lodge leadership team is very engaged in advocating for resources to support the residents
- Any concerns raised by community members are followed up quickly with support from the Board of Directors

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Oliver Lodge is an affiliated home; they have a contract with the SHA to provide care and service to residents
- The Oliver Lodge care team delivers good care and consistently meets the quality indicator targets. Corrective action plans are developed when required
- Follow up from the family advisor occurred regarding her identified need to have support from the SHA/Oliver Lodge staff when transitioning an individual into long term care. It is recognized as a significant life transition and requires dedicated support

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Parkridge Centre - 73818  
 Community: Saskatoon, SK  
 Date of visit: October 3, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Dalene Newton	Executive Director, Continuing Care – Saskatoon Urban
• Jennifer Hamel	Director, Continuing Care 1 – Saskatoon Urban
• Landon Johnson	Site Lead
• Kimberly Yelland	Administrative Assistant, Executive Director,

Please describe what is working well as identified through your visit and discussions with families and residents:

- Parkridge Centre has recently converted a playroom, that was no longer being utilized, into a new long-term care room
- Each neighborhood has its own lounge area. North 2 fundraised and they were able to purchase a new entertainment unit. This area is very popular with the residents
- We were able to speak to one of the managers who mentioned they are very proud of the staff and that they are going above and beyond for the residents
- A number of ceiling track lifts have recently been donated to Parkridge Centre by another home in Saskatoon
- On Northridge 2, there is a very large tub room which includes two tubs and a shower area
- Parkridge Centre has a dentist that comes on site to see the residents. They have a dedicated space for this and have recently updated the room making it feel more comfortable for residents
- We spoke with a resident who has lived at Parkridge for 11 years. She really likes living there, and is comfortable speaking to the managers and team leaders if she has a concern. Overall, she mentioned the staff here is very good. She appreciates that the staff recognize the resident's birthdays; they do this by giving them a cupcake and having a small celebration. One of her concerns is the amount of plastic that is used in day-to-day operations. She would like to see more recycling happening and an alternative option to plastic being used
- The visit focused on Northridge 2 but there are several additional unique programs and services offered at Parkridge Centre including the Dementia Assessment Unit, Resident Computer program, Geriatric Re-enablement Unit, 12 high respiratory needs residents, Community Day Program, complex behavior unit, secure units to meet the needs of the

residents

- There are six neighborhoods, a pool, a well-equipped therapy area, leisure pursuits in a variety of rooms including- library, plant room, a multi-disciplinary room and many courtyards
- Parkridge Centre has its own bus for transporting residents to many events and outings planned by the staff
- The open atrium area is very welcoming, the staff are proud of the work they do and it is appreciated by so many

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- The smoking area at the front of the building is an issue. There are often many residents smoking by the front door
- The public washroom at the front entrance needs to be updated. An updated bathroom would give families a better perception of the building. Currently, the sinks are starting to chip and the bathroom is not very accessible
- Resident needs often require additional support from the behavioral support team which is part of the Continuing Care team

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Parkridge Centre (PRC) is the only owned and operated Special Care Home in Saskatoon Urban
- The PRC team provides excellent care for a number of complex residents; the SHA continues to support these efforts
- The facility upgrades will be put forward for consideration in the 2020-2021 SHA capital planning process
- The PRC administration team will review the concerns regarding smoking at the front of the building and provide a solution

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Porteous Lodge - 73807  
 Community: Saskatoon, SK  
 Date of visit: July 17, 2019

Please indicate who attended the visit:

(Name)	(Title)
• Sharon Garratt	VP, Integrated Urban Health & Chief Nursing Officer
• Andre Moss	Director, Continuing Care
• Nadine Reid	Administrative Assistant, Integrated Urban Health
• Yvonne Morgan,	CEO, Jubilee Residences
• Tyrone Okrainetz	Director of Care, Porteous Lodge
• Individual conversations with residents and companions occurred throughout the visit	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Porteous Lodge has a welcoming, community-like atmosphere, with good staff engagement
- This home has two distinctive areas. The Lodge includes four neighborhoods (floors) with 66 residents and the Villa which includes 2 units with 34 residents.
- The staffing model includes two nurses for the buildings on days and 1 nurse in the evening
- We attended the daily wall walk, which ensured reciprocal communication between all departments of the home as well as engagement of residents in attendance.
- The staff ensure lively activities occur in and outside of the home, including involvement in the kitchen (sundae making), artwork (placed on walls), planting gardens in the courtyard, and having summer BBQ's. They are also in the process planning for a 60<sup>th</sup> anniversary celebration that includes creation of a cookbook with recipes from residents and staff
- Porteous Lodge has benefitted from an exercise area to increase resident mobility as well as a Multisensory room with fiber optics, a palliative bed/family room as well as a classroom for in-house training of staff.
- Porteous Lodge has a lovely renovated spa-like tub room on 2<sup>nd</sup> floor in Lodge, made possible by community donations
- Wheelchair cleaning is done on a weekly basis, on the same day that resident has a bath
- There are laundry services on-site for personal belongings, bedding, and linens.
- Nurse On-Call System is new, with call bells in each resident room
- The LTC resident and family survey was completed in April 2019. An action plan has been created in response to the feedback in the survey and discussed with the residents and families.

- The staff access Community Paramedicine to assist with assessments of residents and to provide IV antibiotics

Please describe areas of improvement as identified through your visit and discussions with families and residents:

- Porteous Lodge was built in 1958 with the addition of the Villa in 1976. Due to its original purpose as a dormitory, its function is not consistent with the functions required in long-term care. In the lodge, there is a one-shared washroom for 16 residents on each floor. This is an issue identified in conversation with some of the residents during our tour
- The Villa has washrooms in each suite, however, the doorways are not wheelchair accessible and as such, they cannot be used by many if any of the current residents.
- On nights, care staff move between the four floors of the Lodge meaning there is no continuous line-of-sight to all of the resident rooms
- Staff commented on congestion and wait times for the elevator. As there is only one in use currently for people it creates a hazard and necessity to move the wheelchairs that get in the way of those exiting the elevator. Funding has been approved to upgrade the second elevator in the near future to help alleviate this concern
- The cisco phones are no longer working and cannot be repaired, inhibiting staff communication
- Concern was raised by staff regarding the ratio of caregivers to residents, in particular making it challenging to complete MDS assessments monthly
- It has been identified that the shortage of physiotherapists and occupational therapists is contributing to reduced hours for the exercise room and ability to keep the residents mobile. The staff would also be grateful for a pedal bike for their exercise area. They often take donations of equipment from other sites that are no longer using them

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Jubilee Residences and Porteous Lodge have plans for redevelopment of their existing site and submitted those to the SHA for consideration. They are seeking a response by October 2019
- They are working with capital projects to replace the nursing station phones
- Feedback about completion of monthly assessments and the QI indicators will be provided to the Quality/Compliance working group of the SHA and Affiliates Steering Committee overseeing the development of the Principles and Services Agreement template

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Samaritan Place - 73821  
 Community: Saskatoon, SK  
 Date of visit: July 15, 2019

Please indicate who attended the visit:

(Name)	(Title)
• Sharon Garratt	VP, Integrated Urban Health&Chief Nursing Officer
• Nadine Reid	Administrative Assistant, Integrated Urban Health
• Bette Boechler	Administrator
• Individual conversations with residents and companions occurred throughout the visit	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Samaritan Place is a new home, only 8 years old, with a warm and inviting atmosphere.
- This home includes two neighborhoods (36 private rooms each with two bariatric rooms) and two secure units with 14 private rooms each
- There are 20 companion suites in which a companion can reside with the resident. These rooms are larger with the bedroom separate from the living/kitchen area. As the companion ages, they may progress to become a resident by going through the assessment and approval process. There was good discussion about how different residents and families are using these rooms differently. They are not always used as initially intended
- Staff consist of LPN's and CCA's. Site employs two nurse practitioners, one is the clinical resource nurse. The two NP's and the Administrator provide back-up call for the LPN's. On night shifts, staffing consists of two LPN's and four CCA's and on dayshifts, there are three LPN's and 16 CCA's. The support services (dietary, housekeeping and grounds keeping) are contracted out
- A director of Spiritual Care provides support for the residents. Services are held in the chapel with various denominations
- A Life Enhancement Recreation Program is staffed and ensures residents are active in and outside of the home i.e. trip to Forestry Farm for BBQ and marshmallow roasting.
- The garden area is a beautiful outdoor space where residents/partners tend to flowers or vegetables and elevated flower boxes also help residents pass the time gardening
- The next update of the resident and family survey for this facility is due in 2020, so there was no new information for this tour



Please describe areas of improvement as identified through your visit and discussions with families and residents:

- Concern was raised by one of the companions regarding the ratio of caregivers to residents as her husband sometimes waits up to an hour for care
- Transporting dialysis patients to and from the home is an issue due to timing of the wait after dialysis. This situation would be helped if there could be prioritization of transport for these individuals
- Currently, there are no Resident Family Council meetings. There are plans to discuss this with the residents and families and develop a strategy going forward. Companion meetings are held as a support network
- The site does not have a bariatric bathtub and the current residents would favor one instead of the shower
- A daily visual management wall is not currently in place; however, the need has been identified for the near future. Huddles do occur every morning
- Challenges were identified in consistent interpretation and reporting of the QI indicators. Corrective action plans are in place for indicators that triggered in the previous quarter
- A renovation is currently underway to have a separate laundry area for the companions as identified during last year's tour

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The feedback about the QI indicators will be provided to the Quality/Compliance working group of the SHA and Affiliates Steering Committee overseeing the development of the Principles and Services Agreement template
- Information about the use of the companion rooms will be utilized when considering these types of rooms in future plans for special care homes
- The transportation challenges for the dialysis patients will be shared with the Renal Program to determine if there are options or opportunities to address the long wait times

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Sherbrooke Community Centre - 73814  
 Community: Saskatoon, SK  
 Date of visit: September 4, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Dalene Newton	Executive Director, Continuing Care – Saskatoon Urban
• Andre Moss	Director, Continuing Care 2 – Saskatoon Urban
• Suellen Beatty	CEO, Sherbrooke
• Cherylee Theoret	Chief Financial Officer, Sherbrooke
• Eric Anderson	Communications Leader
• Kimberly Yelland	Administrative Assistant, Executive Director

Please describe what is working well as identified through your visit and discussions with families and residents:

- When entering Sherbrooke Community Centre you can feel that it is a very vibrant and active home
- We were able to speak with a member of the Resident and Family Council. The council meets every other month; there is representation from each neighborhood on the council. The resident has lived here for four years and enjoys living here. They also mentioned that the food is good and they like that there are two entrees you can choose from
- Sherbrooke is moving away from the secure areas and moving toward a Dementia Inclusive environment
- They have added technology to make the perimeter of the building more secure
- They are offering sessions on Dementia and Alzheimer's to residents so they can understand the behaviors of the people they live with
- Sherbrooke is a pet friendly home. They rescued a cat that recently had kittens and the residents have enjoyed watching them grow
- The resident rooms are a good size and they each have their own private bathroom
- The team at Sherbrooke thanked us for the development of the Behavioral Support Team. They have accessed this support team and have had great success. They recently requested assistance with a complex resident and they are receiving extra help

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- There has been a significant amount of staff turnover. They are looking at splitting some of the full time positions into part time positions as these seem to more popular. There have also been challenges with same day call-in

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Sherbrooke Community Centre is an affiliated home; they have a contract with the SHA to provide care and service to residents
- Sherbrooke Special Care Home continues to provide excellent care to a large number of residents. They participate in a number of quality improvement initiatives and continue to be a good partner with the SHA in providing care to residents and their families

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: St. Ann's Home - 73810  
Community: Saskatoon, SK  
Date of visit: August 7, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Dalene Newton	Executive Director, Continuing Care – Saskatoon Urban
• Andre Moss	Director, Continuing Care 2 – Saskatoon Urban
• Rae Sveinbjornson	Administrator
• Kimberly Yelland	Administrative Assistant, Executive Director

Please describe what is working well as identified through your visit and discussions with families and residents:

- St. Ann's has a very welcoming atmosphere
- The home has a great Missions department. In the front entry way, they have an area that lists their five Mission Pillars which are Hope, Compassion, Dignity & Respect, Holistic Care, and Resident Directed Care. They have pictures of the staff, who have been nominated by their peers, as displaying the characteristics of these Mission Pillars. The administrator mentioned that staff turnover is down and that the staff love to work here even though at times the workload can be very heavy, he attributed this to their mission work
- The activities at St. Ann's are very popular, family members are also able to participate in the activities. The responses around the activities in the Resident and Family Surveys were very positive
- St. Ann's is very proud of their fundraising efforts
- The home is starting renovations on a few of the resident rooms and hallways at the end of August. They will be receiving new flooring, making the bathrooms wider, adding ceiling track lifts, wall protection, and new doors
- Residents we spoke with commented that they enjoyed living at St. Ann's, the staff, students are very nice, and the food is good

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- With the upcoming construction, they will need to move residents out of their rooms for a brief period of time. They will be setting up makeshift rooms in one of the common areas. They will be trying very hard to make this transition as smooth as possible for the residents
- The home is working on their communication. They have a CCA huddle at shift change and a communication book they use. They are working with RN's regarding charge duties, including taking accountability and action in communicating with staff when something is not correct

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- St. Anne's Home is an affiliated home; they have a contract with the SHA to provide care and service to residents
- St. Anne's Home works closely with the SHA administration and the residents and their families regarding infrastructure changes as they prepare for the renovation of the rooms
- The room renovations will provide a more appropriate and safe environment for residents. The closure of these rooms, as they are being renovated, will impact system flow therefore a mitigation plan is in place

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: St. Joseph's Home - 73811  
 Community: Saskatoon, SK  
 Date of visit: October 16, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Dalene Newton	Executive Director, Continuing Care – Saskatoon Urban
• Andre Moss	Director, Continuing Care 2 – Saskatoon Urban
• Sr. Evhenia Kalysh	Administrator
• Kimberly Yelland	Administrative Assistant, Executive Director

Please describe what is working well as identified through your visit and discussions with families and residents:

- The Sisters at St. Joseph's Home provide care, as well as organize the activities. Some of the activities they organize are morning exercises, carpet bowling, bingo, and sing-a-longs
- 65% of the residents at the home speak Ukrainian. Most staff speak Ukrainian as well but the Sisters are there to help with translation
- The building is a diamond shape; the residents are free to walk around/mobilize as they please
- The Sisters live in the building and are available 24/7
- After a move-in, the Sisters will call the family at the end of the day to let them know how their family member is doing. The families really appreciate this
- Infection control is a large priority at St. Joseph's Home. They have two ultra violet disinfecting lights. They sanitize every room with this light once a day
- There is a hairdresser that comes into the home every Tuesday and Friday. This is very popular with some of the residents
- Within the last year they have changed their lighting to LED and updated the exit signs to be green. The residents and staff are enjoying the LED lights as it makes the home much brighter
- There is a large garden that the Sisters look after. The residents enjoy watching the Sisters work in the garden. The vegetables from the garden are used in the kitchen
- The kitchen serves home cooked meals. There are full meals offered twice a day
- They have a very nice dining area with large windows. They have a late breakfast option; this allows residents to sleep-in if they wish
- There is a large visiting area with couches and chairs as well as a dining area that can be used for birthdays or large family gatherings

- There are two rooms for end of life care; these rooms are joined by a space with couches, chairs, and a kitchenette for families to use while visiting
- St. Joseph's Home has a lovely chapel. Services are offered daily. The service is also played through the intercom system so residents are able to participate even if they are in bed
- The administrator attributed the quality of care to the wonderful staff. There is very low staff turnover here
- The building is very well kept and clean

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- There has been an increase in the staffing needs
- St. Joseph's Home tries to be proactive with capital needs. If there is something that needs to be fixed or replaced they do it, but there are some things they need help with from the SHA from the Capital Equipment process

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- St. Joseph's Home is an affiliated home; they have a contract with the SHA to provide care and service to residents
- St. Joseph's Home continues to be an excellent special care home that provides a unique faith based service with a connection to the Ukrainian community

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Stensrud Lodge - 73808  
 Community: Saskatoon, SK  
 Date of visit: September 13, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Dalene Newton	Executive Director, Continuing Care, Saskatoon Urban
• Andre Moss	Director, Continuing Care 2, Saskatoon Urban
• Yvonne Morgan	CEO, Jubilee Residences
• Val Hnatuk	Director of Care
• Tyrone Okrainetz	Director of Porteous Lodge
• Kimberly Yelland	Administrative Assistant, Executive Director

Please describe what is working well as identified through your visit and discussions with families and residents:

- There is a large dining table near the front entrance. This is where the staff completes the charting. The purpose of this is to make it feel as homey and welcoming as possible
- The front entry and hallways are decorated with fall decorations. The décor changes with the seasons
- They are about to start a renovation on one of the tub rooms. They want to make the room feel more like a spa. They will be covering the cinder blocks, adding better ventilation, and a new tub
- They are also in the process of renovating resident rooms; they have completed eight rooms so far. There is new flooring installed, the cinder blocks are covered, and the residents can choose between four different colors for their room
- We spoke with one of the residents. They were very pleased because they were moving into a newly renovated room. They really like living here, the staff is terrific and they feel well looked after
- Stensrud Lodge has a nice large patio area. Residents can have their own garden box if they wish. There is also a large gazebo for residents and families to visit
- The dining areas are quite large making it feel very open. They have plans to expand the dining area upstairs by adding a patio area



Please describe areas for improvement as identified through your visit and discussions with families and residents:

- The results from the Resident and Family Experience Survey were quite low, because of this, they did an Eden Care Survey and they scored very well on this
- Professionalism was brought up at one of their staff meetings; they are trying to work on this. They are implementing little things like, knocking when entering a resident's room, and responding to residents by saying "Yes" first and then working through any challenges
- There is a joint action plan to work on communication, and privacy between the staff and residents
- The administration team at Stensrud Lodge noted that they require support to care for residents with special care needs

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Stensrud Lodge is an affiliated home; they have a contract with the SHA to provide care and service to residents
- SHA continues to work with the leadership team and care team to provide education and support to care for all residents with special care needs

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Sunnyside Adventist Care Centre - 73815  
 Community: Saskatoon, SK  
 Date of visit: August 8, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Dalene Newton	Executive Director, Continuing Care, Saskatoon Urban
• Andre Moss	Director, Continuing Care 2 – Saskatoon Urban
• Randy Kurtz	Administrator
• Kimberly Yelland	Administrative Assistant, Executive Director

Please describe what is working well as identified through your visit and discussions with families and residents:

- When entering Sunnyside Adventist Care Centre it feels very warm and inviting. They have completed several renovations including expanding the dining area, a new multipurpose room, and resident lounges making the home look very modern. More recently, they have completed their expansion of the physiotherapy area as well as receiving new equipment. They have also changed their lighting in the kitchen area to LED making it much brighter
- We had the opportunity to speak with a family member of a resident who has recently moved into Sunnyside from a private care home. He mentioned he can see a change in his mom for the better since she has been at Sunnyside. He is very impressed with the care and activities. Overall, he is very pleased and cannot think of one thing that could be approved upon
- We also spoke with the new President of the Resident and Family Council. They have not held a meeting since he has been appointed as the new President; they have a meeting scheduled for the end of August. He is planning to speak individually with residents to see if they have any concerns and what they would like to see changed
- Residents mentioned they enjoy the meals, with one resident saying the kitchen staff will go to great lengths to accommodate your preferences. The relaxed breakfast is also very popular; this allows residents to sleep-in if they wish
- Sunnyside has been able to add six more ceiling track lifts throughout the home. They have also recently added a washer and dryer that residents can use if they would prefer to do their own laundry, some residents really like this option
- There is also onsite foot care, hairdresser, and a dentist that comes to the home. They are also working on getting an optometrist to provide onsite visits
- The courtyard at Sunnyside is very popular. There is also a community garden where

residents and family members can have their own plot to garden. The Boys and Girls Club of Saskatoon are also involved in this initiative

- The home recently purchased a Triobike and has plans to purchase a wheelchair swing next year
- Administrator mentioned he has seen a change in the staff since implementing the Eden Philosophy. There has been a reduction in sick time as well as overtime

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Sunnyside currently has quite a few shared rooms. They would like to expand in the future to make these rooms private. Administrator has draft plans as to how they would like to expand

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Sunnyside Adventist Care Centre is an affiliated home; they have a contract with the SHA to provide care and service to residents.
- The home is very well kept with a real intent to integrate it within the community. There is evidence of participation from community groups in the home, which contribute to the quality of life for residents
- The purchase of a new Triobike will be a fun and adventurous addition to the home
- The positive comments regarding resident care continue to be stated by the people we visited

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Shaunavon Hospital and Care Centre - 73516  
Community: Shaunavon, SK  
Date of visit: October 29, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Brenda Schwan	Executive Director, Primary Health Centre, Integrated Rural Health
• Crystal Elliott	Manager, Herbert & District Integrated Health Care Facility
• Audra Wong	Regional Manager, Nutrition and Food Services, Cypress Regional Hospital
• Dean Fleury	Regional Facility Maintenance Manager, Cypress Regional Hospital

Please describe what is working well as identified through your visit and discussions with families and residents:

- Families stated “The caregivers are all very good” and “The staff are all amazing”
- Implementing a new menu that the residents have helped develop and will be auditing
- Families really appreciated the dementia training

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- The dining experience and how meals are served needs to be resident-focused versus task oriented
- The heating system in the resident rooms is not always accurate

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Emphasis on a resident-centred model of care in long-term care

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Parkland Integrated Health Centre - 73588  
Community: Shellbrook, SK  
Date of visit: October 23, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Dr. Erin Hamilton	Physician Executive, Integrated Northern Health
• Traci Wallace	Facility Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Beautiful space, small house model in a new facility
- Food is generally very good
- Very good care from staff overall but notes that they seem understaffed
- The bus has allowed for great access to additional activities
- Excellent variety of recreation activities

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Limited choices for patients with dietary restrictions
- Variable access to physician care, some residents were very happy but others complained they barely ever saw a doctor and that it was very difficult to switch physicians
- Concern from community about lack of ambulance service

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Patients and families very much appreciated the small home model and this incorporated into future builds within SHA
- Access to transportation is very valued by residents but often relies on fundraising support

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Spiritwood and District Health Complex - 73148  
 Community: Spiritwood, SK  
 Date of visit: October 29, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Jason Phillips	Facility Manager
• Karen Kindrachuk	Meaningful Life Specialist
• Chris Thiele	Director of Continuing Care North West
• Amy Simonar & Connie Gatzke	Recreation
• Neal Sylvestre	Executive Director, Continuing Care North West
• 22 Residents	
• Three Family Members	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Facility does not use supplementary heaters
- Residents are happy with meals and alternative food choices
- Family is encouraged to have coffee with residents at no cost. Family may purchase a meal at the facility at a nominal fee
- Housekeeping and Laundry are good
- Purposeful Rounding not formally done but still doing routine checks
- Regular family conferences
- Use of a Handivan through the Foundation
- Good use of gazebo –recently built by Foundation
- Celebration of monthly birthdays
- Recreation program supporting Falls Prevention Programming through a Falls Prevention Jeopardy game

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Room temperatures change slowly. Maintenance is not scheduled during weekends; however, they can be called in if needed
- No inter-departmental representation at Resident and Family Council meeting
- Some nursing is a little rough - rushing
- Family member suggest staff need to wear name tags
- Sidewalks require salt/sand - a bit icy this morning
- Alarm system is manual

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Executive Director of Continuing Care will work in collaboration with other Executive Directors of Continuing Care within the Saskatchewan Health Authority to look for issue patterns that may require follow-up across the province
- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue working with families and residents to make improvements. Any significant concerns identified through the tour will be addressed immediately
- Maintenance is aware of slow room temperature change; they will not be able to adjust until Monday. Maintenance can come in on weekends if required
- Reminder to be sent out to Department Supervisors for representation at Resident Council Meetings. The agenda can be modified so department representatives are not required to attend the entire meeting
- Facility Manager to remind nursing staff to slow down with care, no rushing  
Emphasizing the importance of demonstrating kindness to our residents.
- Facility Manager to discuss with staff importance of wearing name tags
- Maintenance will be notified to salt/sand sidewalks and have salt/sand containers at entryways for staff and clients to use
- Will have follow-up with Directors of Maintenance and I.T. to discuss the functionality of Resident Elopement system

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Chateau Providence - 73762  
Community: St. Brieux, SK  
Date of visit: November 1, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- Lisa Major Executive Director, Continuing Care North East
- Monica Slobodzian Administrative Assistant, Executive Director
- Two Family Members
- Four Residents

Please describe what is working well as identified through your visit and discussions with families and residents:

- The food is pretty good
- When I first arrived, the activity program kept us busy all the time
- The activities are fun when they are planned
- Mother has been at the home for two weeks, is already eating better, and is more engaged. Still not herself but markedly better than when she was in Acute Care
- Once a week baths are good. We don't really get that dirty and are able to wash up daily
- Staff are very good
- Staff make a point of engaging with new residents and getting to know them and making the transition less difficult
- Staff are very patient

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- We used to do many activities a year ago; not so much anymore
- Too much "downtime"
- Activities on the weekend are not very common. Makes for long days
- Would be nice to have the "criteria" looked at again and changed so that spouses that have been married for 71 years are not forced to separate. (Resident's spouse lives in Assisted Living in Melfort)
- All the food is either boiled or steamed! No favour. We can put salt and pepper on
- Would like more fried food
- No alternatives or choices – Toast!
- Once supper is over it's bed time. Would be nice to go to bed when we want



- When we go to bed right after supper, our bodies tell us we are done sleeping at 02:00a.m. However, staff do not want to get us up. Would like to go to bed a little later. They are short-staffed so I think that is why this happens
- Coffee is always watered down. It is terrible
- Once a week bath is good but every time I have a bath, I itch for a day after. Chlorine? Chemicals? Was never sensitive before
- Mother has been here for two weeks and I often find her off by herself or sitting alone. Her oxygen tubing gets in the way. Perhaps portable oxygen concentrator? Mother feels isolated at these times where typically she would engage with people
- I sometimes get the feeling that the Facility Administrator is not really listening to what I have to say

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Director Continuing Care North East, Melfort & Area, Sandy Weseen, Facility Administrator, Louise Kosokowsky and Executive Director of Continuing Care, Lisa Major, to look at patterns of issues that may require follow-up
- Discussion of issues with the family or resident councils will occur. Escalation to leadership done as needed
- Feedback provided will be provided to leadership to help inform improvement efforts in Continuing Care

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: St. Walburg Health Complex - 73138  
Community: St. Walburg, SK  
Date of visit: July 3, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Chris Thiele	Director, Continuing Care
• Bethany Bloom	Facility Manager
• Lisa McGillivray	Director, Primary Care
• Neal Sylvestre	Executive Director, Continuing Care North West
• Six Residents	
• Five Family members	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Dietary staff responsive to Resident & Family concerns i.e. food temp
- Two summer students (Rec & Nursing)
- Family BBQ
- Residents appreciate interpersonal relationships with front line care givers i.e. Random Act of Caring
- Purposeful Rounding continues
- Residents appreciate Handivan outings

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Resident rooms cold during winter months – now have new circulating pump for room heat
- Laundry hard on personal clothes
- Perms don't last
- Reduce food portions- don't like waste
- Warm plates – steamer table top
- Have survey results up on wall
- Dining room dark when no staff around
- Purposeful Rounding –will have checklist in each resident room –retraining required?

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Executive Director of Continuing Care will work in collaboration with other Executive Directors of Continuing Care within SHA to look for issue patterns that may require follow-up across the province
- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue working with families and residents to make improvements. Any significant concerns identified through the tour will be addressed immediately
- Director of Primary Care contacted Maintenance supervisor to address cool temperatures in winter months. Maintenance supervisor has arranged for additional circulating pump to increase room temperatures
- Facility Manager is directing family members to take delicate clothing home to be laundered as the facility laundry equipment is known to be hard on clothing

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: New Hope Pioneer Lodge - 73537  
Community: Stoughton, SK  
Date of visit: September 5, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Lori Tulloch	Director, Primary Health Care
• Linda Wilson	Director of Client Care
• Monica Daymon	Nurse B

Please describe what is working well as identified through your visit and discussions with families and residents:

- New lift received as a replacement
- Having issues with large freezer and very slow for repair; considerable waste and had to move fridges into resident dining room
- Very proud of ability to accommodate and adapt to residents' needs
- Staff are very engaged with residents
- Resident Family Council meeting held every second month
- Residents speak very highly of the care received

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Tried a new summer menu – residents still feel it is too repetitive; concerns raised with quality of meat; would like more pickles
- Flooring is severely cracked in two of the residents rooms and needing replacement
- Recruitment and retention is an ongoing challenge

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to improve the menu and meet the needs of the residents
- Continue to work with building services to pursue the replacement of the flooring in the residents' rooms

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Last Mountain Pioneer Home – 73792  
Community: Strasbourg, SK  
Date of visit: August 12, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- Christina Denysek Executive Director, Continuing Care
- Raeleen Hulan Health Services Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Continuing to work on improving food/menu/variation to the tastes of the resident
- Ongoing work on fuller implementation of relaxed breakfast
- Foundation funds used to support overhead table and new recliners to replace old furniture
- Strong community support with volunteers, from the school and day care
- Reviewed the Experience Survey results and created a plan for improving communication process
- Resident Family Council meetings are held monthly with exception of the summer
- Home has a bus that is used for outings and activities
- Enhanced activities and have utilized the court yard more recently
- Rooms are personalized
- Daily huddles occurring with all staff and departments
- Opportunity for 5S and Kanbaning
- Tub room freshly painted and refreshed

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Staffing challenges continue in the site, both care and support services staff
- Home could benefit from considerable maintenance work including updating painting

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Work with building services to plan for the maintenance updates and esthetic work. This home could benefit from work being done

## Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: The Meadows - 73510  
Community: Swift Current, SK  
Date of visit: July 18, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Michelle Aldag	Health Services Manager
• Renee Hovdestad	Health Services Manager
• Beth Vachon	VP, Quality, Safety & Strategy

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents state they really like the art classes and activities. Staff help with nightly exercises. The food is good and most staff are very caring
- Assessments are completed for each resident to develop individualized activity/recreation plans. This has been effective in fostering involvement in activities that suit the needs and preferences of the residents

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- One resident would like more help as she wants to go home and believes more therapy would support her to achieve this

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Individualized activity plans could be considered by other homes in tailoring programs to suit the needs of residents

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Theodore Health Centre – 73152  
Community: Theodore, SK  
Date of visit: September 23, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Bev Pacey	Health Services Manager
• Stacey Pfeiffer	Health Services Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Resident Family Council has been restarted and are regularly occurring every 6 – 8 weeks
- Nachinka has been added as a menu item as well as fulfilling request for stronger tea and coffee
- Activities schedule is including outings using the new handi-bus
- Good community support and great turnout for family and resident BBQ in August
- Very diligent in checking slings and ensuring replacement
- Resident rooms are regularly painted and refreshed
- Some new bedside tables purchased
- Alternating pressure mattresses purchased
- Experienced users have been trained for the provincial upgrade to the minimum data set software, Convergence
- Pub nights implemented and well received and enjoyed
- Outside windows were washed at the request of the residents
- Purposeful rounding is continuing to occur
- Enjoys crocheting, baking and crafts for garage sale
- Enjoys the group exercises and Bingo
- Staff listen when residents need something

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Opportunity to enhance daily visual management through meaningful metrics for staff
- Much of the furniture is cloth; could be replaced to allow for better cleaning
- Residents would like to see the handi-bus used more often as outings are very much enjoyed

- Some concerns noted by residents regarding meals:
  - Would like a greater variety of meat
  - Vegetables tend to be overcooked
  - Temperature of meals is often cold

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to work on enhancing daily visual management to assist with the daily operations of the home
- Continue to review menu and seek to improve the variety of meat on the menu
- Seek ways to enhance the dining experience and serve meals that are a preferred temperature
- Continue to work on including outings into the activities for the residents



**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Newmarket Place - 73768  
 Community: Tisdale, SK  
 Date of visit: September 19, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Lisa Major	Executive Director, Continuing Care North East
• Monica Slobodzian	Administrative Assistant, Executive Director
• Rhonda Donald	RN, Facility Administrator
• Three Residents	
• One Spouse of Resident	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Resident's and family are very pleased with the food at Newmarket Place. There is variety and serving portions are plentiful
- Resident's and Family shared that they appreciated everything that the staff did for the residents at Newmarket Place. Everything is going very well. Could not think of any concerns that needed voicing
- Staff is very good...<sup>29(1)</sup>
- Entertainment organized by Recreation is well attended and fun
- Family member stated that staff encourage her to rest in her spouse's room if she gets tired. She spends a large portion of her day at the home. She feels at home as well
- Residents and Family feel respected and part of their own or their loved ones care. They feel that they are given the same choices as they would make if they remained in their own home i.e. when to get up, what to wear

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Residents shared that sometimes it gets a little chillier at night



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The Newmarket Team along with NE leadership will follow up on issues and continue working with the families and residents to make improvements where and when needed
- Facility Administrator, Ronda Donald, Nurse Manager, Tammy Parlee and ED of Continuing Care (Lisa) to look at patterns of issues that may require follow-up
- Discussion of issues with the family or resident councils will occur. Escalation to leadership done as needed
- Feedback provided will be provided to leadership to help inform improvement efforts in Continuing Care

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Riverside Health Complex - 73154  
Community: Turtleford, SK  
Date of visit: August 19, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Scott Livingstone	Chief Executive Officer
• Neal Sylvestre	Executive Director, Continuing Care North West
• Lisa McGillivray	Director, Primary Care
• Cathy Turn	Facility Manager
• Resident Council and Family Reps	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Facility is very clean and well maintained
- Residents enjoy the activities and appreciate the outings and gardening (share transport with community)
- Staff are kind and caring

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Need to formalize Daily Visual Management, including safety huddles
- Tub Room flooring needs to be replaced – addressed safety risk for patients and staff
- Working on a suitable solution to the swinging door near nursing station – need to balance line of site and patient safety (wandering)
- Need to work with community fire department on assessing and testing codes
- Roadway into facility and parking lot needs to be leveled

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Staff and leadership commitment to continuous quality improvement and alignment of strategy is evident
- Have an active and vibrant Resident and Family Council CCA report sheet
- Community, residents and family members continue to bring forward opportunities to allow residents to engage in community events (i.e. Harvest Dinner)

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Unity & District Health Centre - 73156  
 Community: Unity, SK  
 Date of visit: October 4, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Jaymie Middleton	Facility Manager
• Karen Kindrachuk	Meaningful Life Specialist
• Neal Sylvestre	Executive Director, Continuing Care North West
• Two staff members	Environmental Services & Dietary
• Five Residents	
• Two Family Members	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Meals are good and cooks are accommodating
- Increase in continuing care aide coverage on evenings –reassignment of Environmental Services hours
- Call bells answered in a timely way
- Purposeful Rounding continues
- Bingo is appreciated
- School Companion Program –December – May 2020
- Review of process for federal election

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Some laundry has gone missing; staff have done checks to ensure all clothing labelled
- There are many weeds; could there be a utility worker in the summer?
- Staffing could be better – two staff to put 34 residents to bed
- Maintenance could use a new trimmer –using a hand trimmer
- Monthly cost for personal care items – not worth the money –explanation with respect to distributive cost recovery

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Executive Director of Continuing Care will work in collaboration with other Executive Directors of Continuing Care within SHA to look for issue patterns that may require follow-up across the province.
- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue working with families and residents to make improvements. Any significant concerns identified through the tour will be addressed immediately.
- Better Staffing – resources are being transferred from Environmental Services to Evening continuing care aide
- Recommendation to IIS regarding Summer Utility Worker and request for electric trimmer

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Pleasant View Care Home – 73789  
Community: Wadena, SK  
Date of visit: August 21, 2019  
Please indicate who attended this visit:

(Name)

(Title)

- Christina Denysek Executive Director, Continuing Care
- Shauna Figler Site Leader

Please describe what is working well as identified through your visit and discussions with families and residents:

- Daily huddles held with all departments, including medical clinic and community services
- New beds purchased over the last year
- Two more ceiling track lifts installed
- Purchasing bed alarms for safety of residents
- Varied activities including outings in the evenings and weekends
- Door decals being put on storage and utility rooms to remove the look of an institution
- Wi-Fi works well in the home for residents use

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Building is in need of general repair:
  - Some door replacements due to safety
  - Painting
  - Railings require painting or replacement
  - There is peeling paint on cinderblock walls which is sharp and hazardous to residents
- Opportunity to make a small dining room on the small long-term care wing (Spruce Haven Place) due to the distance to the other long-term care area
- There is need for a fenced outdoor space for small long-term care wing to allow for a safe secure outdoor space
- There are small steps out the fire exit – a ramp would be a safer option



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to work on the repairs and maintenance of the building, prioritizing the areas that pose safety concerns

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Lakeview Pioneer Lodge - 73754  
Community: Wakaw, SK  
Date of visit: October 30, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Lisa Major, RN	Executive Director, Continuing Care North East
• Monica Slobodzian	Administrative Assistant, Executive Director
• Wayne Nogier	Administrator
• Brigitte Vey	Director of Care
• Two Residents	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Residents state that food is pretty good
- “I keep food in my fridge”
- Variety and choices for food are okay but could be better. No complaints really
- Staff are for the most part very good
- Resident recently lost a good friend in the facility. Stated appreciation that staff allowed her to “help me take care of <sup>29(1)</sup>”. Stated she is good at helping people; likes to do it
- We have baths once a week. Both residents stated that this was enough
- Outings to Casino, Riverboat in Saskatoon, Western Development Museum are fun
- Resident takes part in the Walking Program as set up by Physio

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Staff are sometimes slow to respond to requests for help. Could be a bit more attentive
- There are times that staff can be quite rough. Could be more gentle
- More activities would be nice
- I get bored
- Games would be nice
- Resident takes part in the Walking Program as set up by Physio; however, this consumes a lot of the continuing care aide’s time that is not budgeted for. Access to therapy is only every two weeks
- Would like to have more weekend activities
- We enjoy once weekly baths; a shower would be nice sometimes too



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The Lakeview Pioneer Lodge Team along with NE leadership will follow up on issues and continue working with the families and residents to make improvements where and when needed
- Administrator, Wayne Nogier; Nurse Manager, Brigitte Vey and Executive Director of Continuing Care North East, Lisa Major to look at patterns of issues that may require follow-up
- Discussion of issues with the family or resident councils will occur. Escalation to leadership done as needed
- Feedback provided will be provided to leadership to help inform improvement efforts in Continuing Care

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Warman Mennonite Special Care Home - 73816  
Community: Warman, SK  
Date of visit: September 24, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Dr. Rashaad Hansia	Physician Executive, Integrated Urban Health
• Nadine Reid	Administrative Assistant, Integrated Urban Health
• Andre Moss	Director, Continuing Care
• Jim Wiebe	Administrator, Warman Mennonite Special Care Home

Please describe what is working well as identified through your visit and discussions with families and residents:

- The Warman Mennonite Special Care Home has a very welcoming atmosphere with abundant space in a Wanderguard environment. The outdoor garden area is beautiful with flowers and garden boxes planted by residents as well as a covered BBQ area ensuring residents and families are able to enjoy the outdoors. The newly renovated chapel holds three services a week for the residents
- The home consists of 31 long-term care beds. There are also 88 assisted living suites attached to the home yet independent. The co-location of assisted living with long-term care in the same building presents many advantages. For example, a resident of the assisted living suites we met whose wife was a long-term care resident expressed to us that their lives were positively impacted by this co-location
- This home utilizes the first responders in Warman to triage the residents and communicate with the ambulances. Fundraising campaigns led by the two Mennonite churches include the very rewarding Fall Supper, Walkathon and Music Night. A Resident and Family Council meet on a quarterly basis and indications are that they play an active role in supporting the ongoing improvements at the facility. The residents we met expressed that they feel “at home” and “cared for” by the by the “kindhearted” staff. This was reinforced by a comment made by another resident that any issue or concern could be taken directly to the staff/management and they would be responsive

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- We were advised that families and staff had raised a concern that the acuity of residents in the Warman Mennonite Special Care Home is quite high and an increase in staffing would be beneficial to support the care they provide. Management also expressed a desire for additional intermediate nursing and or paramedic support to provide on-site facilities such as intravenous antibiotic therapy, which may reduce the length of hospitalization in some residents by supporting earlier discharges from hospital
- Residents we met also expressed a desire for more meal options and more activities within and outside of the home

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- The Connected Care strategy was discussed, and reassuring management of the SHA's commitment to team based care in the community. The SHA is currently working together with the Warman Mennonite Special Care Home to determine if the current transitional care room can be converted to long-term care use. The SHA is also in process of obtaining a replacement lift for their tub from another facility, where it is no longer needed
- The warm and welcoming environment, dedicated resident garden and co-location of long-term care and assisted living provide opportunities for consideration at other sites

### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Manitou Lodge – 73563  
Community: Watrous, SK  
Date of visit: August 13, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Leah Ehman	Site Leader / Manager of Client Services

Please describe what is working well as identified through your visit and discussions with families and residents:

- Resident Family Council held monthly with exception of summer months
- Family/Resident BBQ, with band, occurring and presenting LTC experience survey results
- Have had a change in activities and events – new staff with new ideas
- Menu has been revised to include more choice in food and drink
- Continue with “Honour Walks” for residents, family and staff
- Good physician and nurse practitioner support on a regular and as-needed basis
- Partnership is in place with the school, specifically Grade 2 and Grade 8 classes
- Care conferences occurring annually and also as needed throughout the year
- In discussion with several residents, they indicated the food is very good and there are plenty of activities to participate in. One resident expressed her appreciation for also having time on her own and no one pushes her if she wants to do something on her own

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Ongoing recruitment and retention challenges of CCAs
- Could benefit from emergency power to tub room and medication room as these rooms have no windows
- Front entry doors into the home are not activated with the handi-cap button for residents to get in and out of the building without assistance



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Pursue with infrastructure handi-cap activation for the front door so residents can independently move through the building
- Review the opportunity to put emergency power into the tub room and medication room
- Continue to provide a variation in recreation to meet the needs of the residents

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Quill Plains Centennial Lodge – 73790  
Community: Watson, SK  
Date of visit: August 21, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Dianne Eisner	Manager, Client Services & Site Leader
• Kelly Tokarchuk	Director, Primary Care

Please describe what is working well as identified through your visit and discussions with families and residents:

- Relaxed breakfast in place
- In discussions with residents, the following was indicated:
  - Fed well, likes everything
  - Staff “spoil us”
  - Plenty of activities to keep them busy, including outings
- Face lift underway for the common area – new TV purchased and plans for painting
- Three new beds purchased this past year
- New ceiling track to be installed
- Outdoor courtyard is well cared for and includes a pond

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Some wall repairs are required in dining area due to old roof leak

Please describe how the information gathered during this visit will be used to inform the SHA’s overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue with the building maintenance and repairs

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Wawota Memorial Health Centre - 73538  
Community: Wawota  
Date of visit: August 26, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Holly Hodgson	Health Services Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Met with 10 residents during the visit at the facility
- Residents like the food and thought the cook was very good
- Temperature of food is good
- Town has a bus that is accessible to use – went to Kenosee for tea
- Regular exercises are done daily
- Relaxed breakfast held for residents
- Supply room has been 5S'ed and ready for Kanban
- New tables for activities room and living room furniture were purchased for common area
- Up to 15 spaces for adult day programming
- New boiler system installed this past year

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Arborite on edge of cupboard in supply room is peeling off which is safety hazard for staff
- Cosmetic work would be valuable for the facility, corners and walls chipped
- Opportunity to enhance daily visual management
- Recruitment challenges for qualified CCAs

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to work collaboratively with building services to schedule required repairs and maintenance
- Continue to seek to improve the daily visual management

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Weyburn Special Care Home - 73528  
 Community: Weyburn, SK  
 Date of visit: July 17, 2019  
 Please indicate who attended this visit:

(Name)	(Title)
• Karen Earnshaw	Vice President, Integrated Rural Health
• Dr. Kevin Wasko	Physician Executive, Integrated Rural Health
• Debbie Obst	Nursing Manager
• Kathy McFadden	Nurse Supervisor

Please describe what is working well as identified through your visit and discussions with families and residents:

- Like that not in a 'specific dementia' unit
- "Everyone is good"
- "Lots of food"
- Has been here two years – have yearly care conferences – doesn't feel included in care
- Happy with the care and care is good
- Good secure courtyard
- Manager comments: Good things are ladies auxiliary, fundraising and volunteers

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Not enough activities for residents with dementia
- Not enough to drink and the small-rimmed glasses are difficult for the resident to drink from: could there be wider options?
- Want more entertainment – especially music
- Not enough physical activities
- Could use more tailored items, i.e. cups, silverware, etc.
- Don't have a doctor here/hardly see the nurse practitioner/pharmacy contact – single service is more expensive (Lack of contact with the extended care team)
- Doesn't walk anymore – would like a physio therapy assessment
- Nourishment is better at Tatagwa
- Not always enough to eat



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Regular huddles
- Daily Visual Management is well established
- Starting to integrate more with leadership at Tatagwa View
- Maintenance – slow to fix things
- Cleaning is not good but place looked clean
- Very few 'free' entertainment
- It is clear that leadership matters. There is a consistent strong leader in this facility and it shows
- Improvements/Issues:
  - Old building – needs a lot of maintenance
  - Human Resources - Lots of staff turnover, no consistency
  - Hard to keep up with required training, i.e. eLearning requires lots of individual time. Manager spent 4.5 hours with a single employee to train on computer use and then help to troubleshoot platform issues, etc.
  - Scheduling of licensed staff is a challenge
  - Pagers not always looked after well by staff

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Tatagwa View - 73531  
 Community: Weyburn, SK  
 Date of visit: July 17, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Karen Earnshaw	Vice President, Integrated Rural Health
• Dr. Kevin Wasko	Physician Executive, Integrated Rural Health
• Trent Truscott	Nurse Manager
• Elyza Salesse	Nurse Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Met with two husbands who have wives that have lived here for 30 months:
  - Physical space and integration of choices
  - Outdoor space
  - “Care needs/abilities ” of people who live in the same house, try to match with my wife’s level of care
  - Really appreciate that staff know her and validate her presence
  - Staff really care, feel confident that issues can be raised
  - Good activities and community volunteers

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Staff ratio – even though one staff to six residents, it seems good but not necessarily in high needs units such as dementia. Staff ratios are the same despite varying patient demands. Having dementia patients integrated into all units could help that but family also recognizes that staff with the right skill set to deal with dementia residents is important
- Would like to see more activities that are geared towards high needs residents. Activities do not always match resident likes or abilities
- Could be more opportunities to increase volunteers. It is not clear what volunteer programs exist at Tatagwa and residents could benefit from their involvement
- Lack of name tags worn by staff
- Concerned of cleanliness of building
- Learning needs to be ongoing

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Use QI reports to form care plans
- Enhance care through advancing small house model
- Family concerns – have made changes, i.e. addition of convex mirrors and food boards
- External grounds need attention
  - Slow to address maintenance issues
- Concerns about cleanliness of rooms

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Whitewood Community Health Centre - 73547  
Community: Whitewood, SK  
Date of visit: September 3, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Amanda Watson	Director, Continuing Care
• Tracey Shire	Facility Manager

Please describe what is working well as identified through your visit and discussions with families and residents:

- Daily visual huddles occur daily with all departments attending
- Safety is discussed as well as items which may impact operations
- Recreation has been enhanced and running well including a variety of group and individual programming
- Recreation spends considerable time fundraising to support programming
- Family picnic held and very well attended
- Shower is repaired and functioning
- New Gazebo completed for the courtyard area
- Raised boxes being used for vegetables
- Quarterly Resident Family Council meetings are held
- Received a donation from Kennedy United Church and this is being used for new chairs for front entry

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Large hallway doors which used to close area for specialized area are no longer required – should be removed as they disrupt residents as they walk through the hallway
- Nursing station is still to be upgraded/renovated

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Continue to seek ways to improve the experience for the residents as they identify needs
- Work with building services to determine if doors can be removed to assist the residents as they walk through the hallway

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Wilkie & District Health Centre - 73171  
Community: Wilkie, SK  
Date of visit: October 8, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Debbie Kurulak-Milne	Facility Manager
• Karen Kindrachuk	Meaningful Life Specialist
• Deanna Miller	Director, Continuing Care North West
• Neal Sylvestre	Executive Director, Continuing Care North West
• Jesse Pernitsky	Rec Coordinator
• 16 Residents	
• One Family Member	

Please describe what is working well as identified through your visit and discussions with families and residents:

- Plans for elections
- Regular outings, coffee & Oktoberfest
- Residents are enjoying the meals
- Building is warm, clean and smells good
- Purposeful Rounding continues
- Tour day –children’s program followed Resident and Family Council meeting which is a regularly scheduled event

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Sometimes personal laundry goes missing. Facility has labeler and heat press
- Rec. Coordinator is not currently following North West format for Resident and Family Council Meetings



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Executive Director of Continuing Care will work in collaboration with other Executive Directors of Continuing Care within SHA to look for issue patterns that may require follow-up across the province
- Directors of Continuing Care will work cross functionally with the Directors of Primary Care, Nutrition Services and Environmental Services to follow up on issues and continue working with families and residents to make improvements. Any significant concerns identified through the tour will be addressed immediately
- Meaningful Life Specialist is working with Rec. Coordinator towards achieving consistency in Resident and Family Meeting format

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Wolseley Memorial Integrated Care Centre - 73173  
 Community: Wolseley, SK  
 Date of visit: September 24, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Karen Earnshaw	Vice President, Integrated Rural Health
• Dr. Kevin Wasko	Physician Executive, Integrated Rural Health
• Barb Fitz-Gerald	Facility Manager
• Barb Watson	Supportive Services Manager
• Lisa Tarr	Resident Care Coordinator

Please describe what is working well as identified through your visit and discussions with families and residents:

- 12 CCA Days, 2 Nurse B; 9 CCA Evenings, 2 RN; 1 NP on 1 side, MD on 1 side (Need to replicate)
- Very proactive with QIs – most CAPs in place prior to information coming back
- Bright space
- Resident council meets monthly – invites a guest to each one
- Pharmacist does quarterly med reviews
- Wide hallways, refurbished tub rooms, Meals on Wheels five times a week
- Implementing purposeful rounding
- Initiative to decrease labs; preprinted order set for LTC (developed by geriatric assessment team) initiated by Nurse B and NP

Met with resident & wife

- Patients allowed to sleep in
- Good variety of food
- Has been a resident for almost 1 year, in home community
- Very good activity director with positive attitude and a variety of activities

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- No relaxed breakfast
- Very institutional – wake residents up on night shift
- Having a visioning session about culture change for more ‘home-like’ facility
- Staff shortage that leads to OT and fatigue
- Increase ceiling track lifts- 1/3 have ceiling tracks

- SLP and OT resources
- Work can improve on communication

Met with resident & wife

- Upset that fundraising is needed for activities
- Staff prefer he gets up early and goes to bed early
- No activities on weekend, no activities during outbreaks
- Caregivers should have a better understanding of Huntington's Disease
- Supper is often soup and sandwich

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Single point of contact – in future for all registration. Admission handbook not being given
- Telehealth support – should involve a health care provider and caregiver to participate



### Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019

Name and number of facility: Golden Acres - 73787  
Community: Wynyard, SK  
Date of visit: August 1, 2019  
Please indicate who attended this visit:

(Name)	(Title)
• Christina Denysek	Executive Director, Continuing Care
• Cheryl Sinclair	Site Leader

Please describe what is working well as identified through your visit and discussions with families and residents:

- Resident Family Council meetings being held again and generally occurring monthly. This is assisting with improved communications
- Implemented a Gratitude Program for appreciation of staff
- Art Project underway to create scenes on exit doors to detour exit seekers
- Continuing to work diligently on Quality Indicators and working towards compliance
- Quality Indicators are visible on huddle board
- Courtyard and gardens are beautiful and well maintained by volunteers
- Huddles take place daily during the week with departments taking turns running them
- Post menus on a daily basis
- Post working staff of the day
- Pet committee consists of staff, residents and families:
  - Takes place on Sundays to enhance weekend activities
  - Chick hatching
  - Lamb visitation
  - Kittens
  - Dog show is coming up
- Resident art is displayed throughout the home

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Working to enhance a side entry door for residents to exit/enter easily to the gated area in the front as it is used frequently
- Recruitment in rural setting continues to be a challenge
- Residents would like to see enhanced weekend activities
- Countertops in houses are to be replaced based on safety
- Continue to work on purposeful interactions and ensure they are meaningful
- Paint in the hallways could use some touch up



Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- Improve purposeful interactions
- Replace deteriorating countertops
- Continue to do esthetic work in the home to maintain upkeep

**Saskatchewan Health Authority Long-Term Care Quality Assessment – 2019**

Name and number of facility: Yorkton and District Nursing Home - 73776  
Community: Yorkton, SK  
Date of visit: June 5, 2019

Please indicate who attended this visit:

(Name)	(Title)
• Suann Laurent	Chief Operating Officer
• Danielle Bellamy	Director
• Pam Ryczak	Health Services Manager
• Crystal Aarrestad	Health Services Manager
• Suzanne Beck	Health Services Manager
• Umair Kharral	Manager of Operational Support Services

Please describe what is working well as identified through your visit and discussions with families and residents:

- Facility is very clean and well maintained
- Residents and families enjoy the students that are in the facility
- Residents enjoy the activities and appreciate the outings and gardening
- Staff are kind and care

Please describe areas for improvement as identified through your visit and discussions with families and residents:

- Need to formalize Daily Visual Management including safety huddles
- Physicians are not all working in collaborative practice model – nurse practitioner model would enhance access for residents
- Access to education for cooks in a struggle
- Access to an ATM would be helpful for families that want to purchase meals to stay with loved ones

Please describe how the information gathered during this visit will be used to inform the SHA's overall effort to improve quality of care for residents and staff in long-term care facilities throughout the province:

- CPSI initiative in Skinner Unit using the 5I's for reporting
- CCA report sheet
- Bell magnet idea used as an andon when resident is on the toilet
- Living the values, exercises
- Staff and leadership commitment to continuous quality improvement and alignment of strategy is evident