

11/12 Q1 Status Update

Senior Friendly Care Strategic Plan 2010/11 – 2012/13

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RUNN  **MEDE**
HEALTHCARE CENTRE

Overview

- Assumptions
- Vision
- Goals
- Scorecard

Assumptions

- Senior Friendly Care strategic plan must align with Runnymede Healthcare Centre's (RHC) strategic plan
- All dates in this document refer to fiscal year (April 1st – March 31st) unless otherwise indicated

Vision

- Leading the way in specialized complex continuing care
- Be a leader in Senior Friendly Care

Goals: 2010/11 – 2012/13

1. Demonstrate commitment to the change process for senior friendly care at the highest levels
2. Incorporate the needs of seniors in the hospital Health Human Resources Plan
3. Develop & implement initiatives that address the five domain framework for Senior Friendly Hospitals:
 1. Organizational Support
 2. Processes of Care
 3. Emotional & Behavioral Environment
 4. Ethics in Clinical Care & Research
 5. Physical Environment
4. Continue to build & strengthen strategic partnerships
5. Evaluate Senior Friendly Care Strategy

Scorecard: 2010/13 Goals

Goal	Status	Key Activities	Responsibility	Target Date	Actual Date	Issues
1. Demonstrate commitment to the change process for senior friendly care at the highest level	Completed	-Board commitment to identify Senior Friendly Care as a key priority at RHC	-VP Clinical Programs	10 / 2010	10 / 2010	
	Completed	-Senior executive to champion Senior Friendly Care Strategy	-VP Clinical Programs	10 / 2010	10 / 2010	
	Completed	-Develop Senior Friendly Care Strategy & publish on hospital website	-VP Clinical Programs -Manager, Communications	04 / 2011	04 / 2011	
	on Track/Minor Issues	-Fully implement Senior Friendly Care Strategy	-VP Clinical Programs -Manager, Communications	03 / 2013		

Legend: Completed on Track/Minor Issues at Risk/Pre-emptive Action Required Critical Issue/Corrective Action Required Mandatory

Scorecard: 2010/13 Goals

Goal	Status	Key Activities	Responsibility	Target Date	Actual Date	Issues
2. Consider the needs of an seniors in development of the Hospital Health Human Resources Plan	Completed	-Identify main elements to address the needs of seniors	-Senior (Sr.) Director Human Resources (HR)	12 / 2010	12 / 2010	
	Completed	-Incorporate elements into hospital health human resources plan:	-Sr. Director HR -All Clinical Managers			
	Completed	•Focus recruitment on candidates with expertise in working with seniors		Ongoing		
	Completed	•Update clinical job descriptions to include responsibility of providing appropriate care to seniors		12 / 2010	12 / 2010	
	On Track/Minor Issues	•Ensure staff orientation & education programs provide information & awareness about the needs of seniors	- Chief Nursing Executive	06 / 2011		-delayed due to staff turnover; new target Oct 2011

Legend: Completed on Track/Minor Issues at Risk/Pre-emptive Action Required Critical Issue/Corrective Action Required Mandatory

Scorecard: 2010/13 Goals

Goal	Status	Key Activities	Responsibility	Target Date	Actual Date	Issues
2. Consider the needs of an seniors in development of the Hospital Health Human Resources Plan (continued)		• Incorporate evaluation of senior friendly appropriate care & knowledge into performance review for clinical staff	-Sr. Director HR -Clinical Managers	03 / 2012		
		• Review and evaluate appropriateness for new volunteer programs to support seniors:	-Manager, Volunteer Services			
		-Coffee Chat		06 / 2011	06 / 2011	
		-News Peruse		06 / 2011	06 / 2011	
		-Hospital Elderlife Program (HELP)		06 / 2011	06 / 2011	

Legend: Completed on Track/Minor Issues at Risk/Pre-emptive Action Required Critical Issue/Corrective Action Required Mandatory

Scorecard: 2010/13 Goals

Goal	Status	Key Activities	Responsibility	Target Date	Actual Date	Issues
3. Develop & implement initiatives that address the five domain framework for Senior Friendly Hospitals:						
3.1 Organizational Support		-Identify age-specific indicators of utilization & quality of care relevant to seniors that are currently monitored and/or will be monitored by the hospital:	-VP Clinical Programs			
		•Presence of indwelling catheter		09 / 2010	09 / 2010	
		•Presence of pressure sores/ulcer		09 / 2010	09 / 2010	

Legend: Completed on Track/Minor Issues at Risk/Pre-emptive Action Required Critical Issue/Corrective Action Required Mandatory

Scorecard: 2010/13 Goals

Goal	Status	Key Activities	Responsibility	Target Date	Actual Date	Issues
3.1 Organizational Support (continued)		•Presence of patients in daily restraints		09 / 2010	09 / 2010	
		•Use of anti-psychotic medication without a diagnosis of psychosis		09 / 2010	09 / 2010	
		•Improvement in performance of activities of daily living (ADL)		09 / 2010	09 / 2010	
		•Decline in ability to walk or wheel self		09 / 2010	09 / 2010	
		•Communication decline		09 / 2010	09 / 2010	
		•Increase in depression or anxiety		09 / 2010	09 / 2010	
		•Patients falling		09 / 2010	09 / 2010	
		•New stage 2 or greater skin ulcers		09 / 2010	09 / 2010	

Legend: Completed on Track/Minor Issues at Risk/Pre-emptive Action Required Critical Issue/Corrective Action Required Mandatory

Scorecard: 2010/13 Goals

Goal	Status	Key Activities	Responsibility	Target Date	Actual Date	Issues
3.1 Organizational Support (continued)	Completed	•CCC RUGS weighted patient days		09 / 2010	09 / 2010	
	Completed	•Adverse drug reactions		09 / 2010	09 / 2010	
	Completed	•Pain management		09 / 2010	09 / 2010	
	Completed	•Elder abuse		09 / 2010	09 / 2010	
	On Track/Minor Issues	•Maintaining hydration and nutritional status		09 / 2011		
	On Track/Minor Issues	•Decrease in bladder/urinary continence		12 / 2011		
	On Track/Minor Issues	•Dementia/ behavioral disturbances		03 / 2012		
	On Track/Minor Issues	•Delirium		06 / 2012		
On Track/Minor Issues	•Sleep management		09 / 2012			

Legend: Completed on Track/Minor Issues at Risk/Pre-emptive Action Required Critical Issue/Corrective Action Required Mandatory

Scorecard: 2010/13 Goals

Goal	Status	Key Activities	Responsibility	Target Date	Actual Date	Issues
3.1 Organizational Support (continued)		-Assign relevant Committee to monitor quality of care & utilization indicators	-VP Clinical Programs	10 / 2010	10 / 2010	
3.2 Processes of Care		-Ensure protocols & monitoring metrics are in place for age-specific indicators of utilization & quality of care not currently being addressed, to address areas of confirmed risk:	-Chief Nursing Executive			
		•Maintaining hydration and nutritional status		09 / 2011		
		•Decrease in bladder/urinary continence		12 / 2011		

Legend: Completed on Track/Minor Issues at Risk/Pre-emptive Action Required Critical Issue/Corrective Action Required Mandatory

Scorecard: 2010/13 Goals

Goal	Status	Key Activities	Responsibility	Target Date	Actual Date	Issues
3.2 Processes of Care (continued)	On Track/Minor Issues	•Dementia/ behavioral disturbances		03 / 2012		
		•Delirium		06 / 2012		
		•Sleep management		09 / 2012		
		-Evaluate effectiveness of protocols & monitoring metrics in place for areas of confirmed risk		03 / 2013		
3.3 Emotional & Behavioral Environment	On Track/Minor Issues	-Incorporate age sensitive satisfaction measures into hospital quality management strategies	-VP Clinical Programs	03 / 2012		
		-Continue Patient Family Council which meets regularly to provide a forum to inform seniors & their families about decisions affecting their care	-VP Clinical Programs	Ongoing		

Legend: Completed on Track/Minor Issues at Risk/Pre-emptive Action Required Critical Issue/Corrective Action Required Mandatory

Scorecard: 2010/13 Goals

Goal	Status	Key Activities	Responsibility	Target Date	Actual Date	Issues
3.3 Emotional & Behavioral Environment (continued)		-Develop & implement a patient relations process for seniors & their families & make this process available via the hospital website	-Sr. Director, Corporate Planning & Communications	04 / 2011	04 / 2011	
		-Ensure policies in place to support appropriate attitudes & behaviors of healthcare professionals towards seniors	-VP Clinical Programs	09 / 2010	09 / 2010	

Legend: Completed on Track/Minor Issues at Risk/Pre-emptive Action Required Critical Issue/Corrective Action Required Mandatory

Scorecard: 2010/13 Goals

Goal	Status	Key Activities	Responsibility	Target Date	Actual Date	Issues
3.4 Ethics in Clinical Care & Research	Completed	-Ensure staff have access to a clinical ethicist to advise on seniors issues	-VP Clinical Programs	09 / 2010	09 / 2010	
	Completed	-Review hospital policy on Advance Care Directives on a regular basis & revise as appropriate	-VP Clinical Programs	03 / 2011	03 / 2011	
	Completed	-Ensure Ethical Decision Making Framework is available to guide decision making in difficult situations	-VP Clinical Programs	09 / 2010	09 / 2010	
3.5 Physical Environment	Completed	-Review physical environment of hospital & identify areas that could be improved to address seniors needs	-VP Clinical Programs	10 / 2010	10 / 2010	
	Completed	-Develop & implement an Accessibility Plan	-VP Clinical Programs	12 / 2010	02 / 2011	

Legend: Completed on Track/Minor Issues at Risk/Pre-emptive Action Required Critical Issue/Corrective Action Required Mandatory

Scorecard: 2010/13 Goals

Goal	Status	Key Activities	Responsibility	Target Date	Actual Date	Issues
3.5 Physical Environment (continued)		-Evaluate effectiveness of Accessibility Plan & make enhancements where necessary	-Sr. Director Corporate Planning & Communications	03 / 2012		
4. Continue to build & strengthen strategic partnerships		-Investigate entering into a participation agreement with the Regional Geriatric Program of Metropolitan Toronto	-VP Clinical Programs	05 / 2011	05 / 2011	
		-Ensure representation on key LHIN task forces:	-VP Clinical Programs			
		•Senior Friendly Care		09 / 2010	09 / 2010	
		•Medically Complex Hip Fracture		09 / 2010	09 / 2010	
		•Alternate Level of Care/Long Stay		09 / 2010	09 / 2010	
		•Integrated care for seniors		09 / 2010	09 / 2010	

Legend: Completed on Track/Minor Issues at Risk/Pre-emptive Action Required Critical Issue/Corrective Action Required Mandatory

Scorecard: 2010/13 Goals

Goal	Status	Key Activities	Responsibility	Target Date	Actual Date	Issues
4. Continue to build & strengthen strategic partnerships (continued)	on Track/Minor Issues	-Guide senior friendly care in the community by developing opportunities to collaborate with healthcare professionals to offer services in line with the needs of seniors:	-VP Clinical Programs			
	Completed	•Dental clinic		06 / 2011	02 / 2011	
	on Track/Minor Issues	•Chiropody		08 / 2011		

Legend: Completed on Track/Minor Issues at Risk/Pre-emptive Action Required Critical Issue/Corrective Action Required Mandatory

Scorecard: 2010/13 Goals

Goal	Status	Key Activities	Responsibility	Target Date	Actual Date	Issues
5. Evaluate Senior Friendly Care Strategy	Completed	-Complete strategy to enhance senior friendly care at Runnymede	-VP Clinical Programs	03 / 2011	03 / 2011	
	Completed	-Establish monitoring scorecard to evaluate progress toward attainment of goals	-VP Clinical Programs	03 / 2011	03 / 2011	
	Completed	-Conduct annual patient satisfaction survey	-Sr. Director, Corporate Planning & Communications	04 / 2011		
	on Track/Minor Issues	-Annually analyze patient satisfaction survey results to determine attainment of senior friendly care strategy goals	- Sr. Director, Corporate Planning & Communications	03 / 2012		

Legend: Completed on Track/Minor Issues at Risk/Pre-emptive Action Required Critical Issue/Corrective Action Required Mandatory