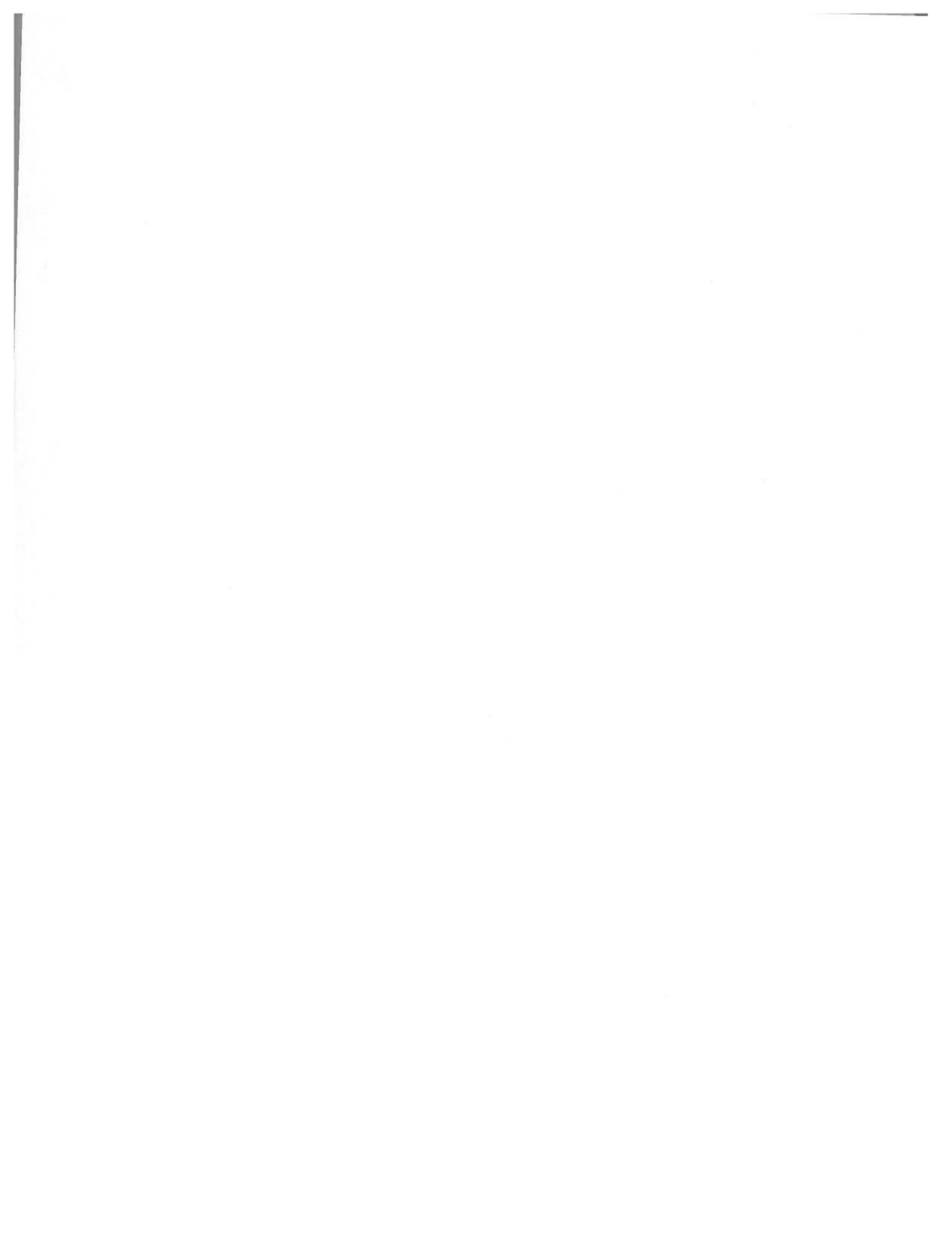


- 1.) CALL TO ORDER
- 2.) ADOPTION OF THE MINUTES DATED DECEMBER 13, 2013 AS AIT ACHED
- 3.) DISCLOSURE OF PECUNIARY INTEREST
- 4.) MOTION TO MOVE IN-CAMERA

Subject	Section Pursuant to Municipal Act 2001, as amended
Personal matters about an identifiable individual, including municipal or local board employees	s. 239 (2)(b)

- 5.) MOTION TO MOVE BACK INTO REGULAR SESSION
- 6.) ACTING ADMINISTRATOR'S REPORT
- 7.) COMMUNICATIONS INFORMATION PACKAGE
- 8.) NEXT MEETING - June 6, 2014
Huron Lodge Conference Room
- 9.) ADJOURNMENT



KK/
Windsor, Ontario December 13, 2013

A meeting of the **Committee of Management for Huron Lodge** is held this day commencing at 9:00 o'clock a.m. in the Huron Lodge Conference Room, there being present the following members:

Councillor Bill Marra, Chair
Councillor Ron Jones
Councillor Hilary Payne

Also present are the following resource per Jmnel:

Mary Bateman, Acting Administrator, Huron Lodge
Jelena Payne, Community Development & Health Commissioner
Karen Kadour, Committee Coordinator

1. CALL TO ORDER

The Chair calls the meeting to order at 9:07,o'clock a.m. and the Committee of Management for Huron Lodge considers the Agenda being Schedule "A" ***attached*** hereto, matters which are dealt with as follows:

2. ADOPTION OF THE MINUTES

Moved by Councillor Payne, seconded by Councillor Jones,
That the minutes of the Committee of Management for Huron Lodge Long Term Care Home at its meeting held June 10, 2013 **BE ADOPTED** as presented.
Carried.

3. DISCLOSURE OF PECUNIARY INTEREST

None disclosed.

4. MOTION TO MOVE IN CAMERA

Verbal Motion is presented by Councillor Jones, seconded by Councillor Payne, to move In Camera at 9:08 o'clock a.m. for discussion of the following items:

Item No.	Subject	Section Pursuant to Municipal Act 2001, as amended
5.1	Personal matter about an identifiable individual, including municipal or local board employees	s. 239(2)(b)

Motion Carried.

Discussion on the items of business.

6. **MOTION TO MOVE BACK INTO REGULAR SESSION**

Moved by Councillor Jones, seconded by Councillor Payne, to move back into public session at 9:30 o'clock a.m.

Motion Carried.

Moved by Councillor Payne, seconded by Councillor Jones,
That the Clerk **BE DIRECTED** to transmit the recommendation(s) contained in the report(s) discussed at the In Camera Committee of Management for Huron Lodge Long Term Care Home held December 13, 2013 at the next regular meeting.

Moved by Councillor Jones, seconded by Councillor Payne,
That the verbal In Camera report of the Acting Executive Director, LTC Administrator, Huron Lodge relating to the personal matter about an identifiable individual, including municipal or local board employees **BE RECEIVED** and further, that Administration **BE AUTHORIZED** to proceed in accordance with the verbal direction of the Committee of Management for Huron Lodge Long Term Care Home.
Carried.

6. **ACTING ADMINISTRATOR'S REPORT**

M. Bateman reports at this time, variances for the 3rd quarter of the 2013 budget show a deficit projection of \$233,000.

M. Bateman distributes the Ministry of Health and Long-Term Care "Inspection Report - Public Copy" for inspections which occurred on May 22, 2013, August 28 and 29, 2013 and September 11, 2013, attached as Appendix "A", "B" and "C" respectively.

Moved by Councillor Jones, seconded by Councillor Payne,
That the report of the Acting Executive Director, LTC Administrator, Huron Lodge dated September 9, 2013 entitled "Huron Lodge Long Term Care Home" regarding an update regarding issues relating to resident care, the Ministry of Health, the

Local Health Integration Network and other initiatives that impact the Long Tenn Care sector **BE APPROVED** for the period from June 1, 2013 to August 13, 2013.

Carried.

Moved by Councillor Payne, seconded by Councillor Jones.

That the report of the of the Acting Executive Director, LTC Administrator, Huron Lodge dated December 13, 2013 entitled "Huron Lodge Long Term Care Home" regarding an update regarding issues relating to resident care, the Ministry of Health, the Local Health Integration Network and other initiatives that impact the Long Tenn Care sector **BE APPROVED** for the period from September 1, 2013 to November 30, 2013.

Carried.

7. **HURON LODGE ACCREDITATION REPORT**

Moved by Councillor Jones, seconded by Councillor Payne,

That the report of the Acting Executive Director, LTC Administrator, Huron Lodge dated August 21, 2013 entitled "Huron Lodge Accreditation" **BE RECEIVED** for information.

Carried.

8. **INTEGRATED ASSESSMENT RECORD (IAR) PROJECT REPORT**

Moved by Councillor Payne, seconded by Councillor Jones,

That the report of the Director of Care, Huron Lodge dated August 14, 2013 entitled "Integrated Assessment Record (IAR) Project" regarding the implementation of the Integrated Assessment Record Project as mandated by the Ministry of Health and Long Tenn Care and through Community Care Information Management **BE RECEIVED**.

Carried.

9. **PHYSIOTHERAPY SERVICES FUNDING REPORT**

M. Bateman advises. the Request for Proposals for physiotherapy services will close on January 10, 2014.

Moved by Councillor Jones, seconded by Councillor Payne,

That the report of the Acting Executive Director, LTC Administrator, Huron Lodge dated August 22, 2013 entitled "Physiotherapy Services for the Residents of Huron Lodge" regarding changes that have been announced by the Ministry of Health and Long Tenn Care (MOHLTC) as it relates to funding for physiotherapy services **BE RECEIVED**.

Carried.

10. **COMMUNICATIONS INFORMATION PACKAGE**

Moved by Councillor Jones, seconded by Councillor Payne,
That the following communications **BE RECEIVED** for information:

1. Erie St. Clair Local Health Integration Network - Community Report - Fall 2013
2. Ministry of Health and Long Term Care - Fall 2013 Regulatory Amendments under the Long-Term Care Homes Act, 2007
3. Performance Improvement & Compliance Branch Health System Accountability and Performance Division - Long-Term Care Homes Quality Inspection Program - Update Overview of Current Activities
4. Health Quality Ontario - Long-Term Care Benchmarking Resource Guide
5. Health Quality Ontario - Individual Home Results- Huron Lodge
6. Ontario Association of Non-Profit Homes and Services for Seniors - Leading Seniors' Care- 2012 Annual Report
7. Ontario Association of Non-Profit Homes and Services for Seniors - Long Term Care Provincial Snapshot - August 2013

Carried.

11. **DATE OF NEXT MEETING**

The next meeting will be held on March 7, 2014 at 9:00 o'clock a.m. in the Huron Lodge Conference Room.

12. **A_DJ_QURNMENT**

There being no further business, the meeting is adjourned at 9:40 o'clock a.m.

Councillor Bill Marra, Chair

Committee Coordinator

**THE CORPORATION OF THE CITY OF WINDSOR
Huron Lodge**



TO: Huron Lodge Committee of Management

**SUBJECT: HURON LODGE LONG TERM CARE HOME -
ACTING ADMINISTRATOR'S REPORT TO THE
COMMITTEE OF MANAGEMENT**

1. RECOMMENDATION: City Wide: _____ Ward(s): _

That the report from the Acting Administrator of Huron Lodge providing the Committee of Management with an update on issues relating to resident care, the Ministry of Health, the Local Health Integration Network and other initiatives that impact the Long Term Care sector **BE RECEIVED** for information and **APPROVED** for the period of December 1 to February 28, 2014.

2. BACKGROUND:

The Committee of Management report serves as the Acting Administrator of Huron Lodge's update and official record for the Committee of Management for the period from December 1, 2013 to February 28, 2014.

3. DISCUSSION:

(Huron Lodge Budget Update-20131

At this time, the final 2013 Budget Variance is anticipated to be reported to Council late in March 2014; the deficit projected at the 3rd quarter for 2013 variance has been substantially mitigated and reduced to less than half originally reported. The anticipated deficit being reported to Council is approximately \$107,000.

!Ontario Association of Non-Profit Homes and Services for Seniors (OANHSS)I

1. OANHSS is a member of the Steering Committee for the Long Term Care Task Force on Resident Care and Safety. The second update, released late in November 2013, is attached as **Communication #1**. This report highlights work undertaken since the January 2013 report to implement the three-year Action Plan to address abuse and neglect in LTC homes. The Task Force acknowledges that more work and resources are clearly needed, particularly to support homes in caring for residents with challenging behaviours.

2. OANHSS recently presented the Association's pre-budget funding recommendations to the Standing Committee on Finance and Economic Affairs. The focus is government investment to support long term care homes in caring for residents with aggressive behaviours and mental health issues. The submission and the summary of recommendations are attached as **Communication #2** and **#3** respectively.

!Ministry of Health and Long-Term Care (MOHLTC

1. Case Mix Index {CMI} Result for 2014/15

At the end of January 2014, Huron Lodge received notice from the Ministry of Health and Long Term Care on its CMI Results for 2014/15 Nursing and Personal Care (NPC) funding. For the year commencing April 1, 2014 to March 31, 2015, Huron Lodge's Funded CMI is 1.0141. This translates into a 4.32% change from prior year - approximately an increase of \$300,000.00 in subsidy. A report to the Standing Committee and Council will follow. Copy attached to this report.

2. Year-End Training Funding

Late in December 2013, MOHLTC announced one-time funding for training and development of long term care home direct care staff. Huron Lodge will be receiving a total of \$29,100.00 for the provision of this training to be completed by March 31, 2014.

3. LTCH Data Quality Inspections

This program is being formalized by the Ministry whereby audits will occur in all homes every 3 years. The program is expected to launch in the spring starting with information to homes on what they can expect. The results of inspections will be used to develop data quality strategies in areas such as education and standards.

4. Physiotherapy and Exercise Reporting

The Ministry has released further details on physiotherapy and exercise reporting. Webinars were scheduled throughout January 2014 for staff in LTC homes to familiarize themselves with reporting requirements on Ministry-supplied templates.

Huron Lodge recently issued an RFP for Physiotherapy Services. Evaluation has occurred and a report recommending the successful proponent will be presented to the Social Development Health & Culture Standing Committee on March 5, 2014.

5. Participation in the Integrated Assessment Record Project OAR) - Update

The Delegation of Authority Report for the Integrated Assessment Record project continues to be reviewed corporately for processing. Legal has provided feedback on both the accountability agreement with Consolidated Health Information Services (CHIS), the company that will be responsible for housing the data sharing network, and the funding agreement with the Ministry of Health and Long Term Care. Information Technology has completed and evaluated a risk assessment identifying key factors for consideration when implementing. As the Integrated Assessment Record requires that a third party houses corporate data, Legal and Information Technology have recommended that the City of Windsor Form 7, Third Party(s) having Access to or Custody of Personal Information Agreement be provided to CHIS for signature to ensure appropriate legislative privacy information is followed. At this time, the form is being reviewed by the IAR project and discussions are occurring with CHIS as to the requirements of the City of Windsor.

Ontario Association of Community Care Access Centres (OACCAC)

Beginning last year, CCAC's (Community Care Access Centres) have been encouraging LTC homes to sign the Network Services Agreement (NSA) and Data Sharing Agreement (DSA) which would enable electronic referrals to LTC homes from CCAC's. The original versions have been amended several times and have now been recently distributed to LTC homes.

At this point in time, Huron Lodge will be forwarding the agreements to Information Technology and Legal for further review and input. Pending any further corporate requirements, Huron Lodge will not be moving forward on this initiative without further consult and process.

!Other Business

1. The Parkland Institute in Alberta has conducted a study concluding that "for-profit elder care is inferior to care provided publicly or by a not-for-profit agency" and recommended that the province phase-out private, for-profit long term care delivery. The study reviewed long term care delivery in Alberta. The report cited that for-profit homes had significantly lower staffing levels than not-for-profit homes. The report is attached as **Communication #4**.
2. An arbitration session heard on February 18, 2014 for a CUPE 543 grievance in relation to scheduling at Huron Lodge determined that scheduling methods prior to May 2012 as cited in the arbitrator's decision established compliance with 0. Reg. 79/10 of the Long-Term Care Homes Act, 2007.

3. Huron Lodge has compiled the data for the 2013 Resident Family Satisfaction Survey and the 2013 Initial Resident Family Satisfaction Survey. The Summary of results is attached to this report. The summaries contain data and feedback from residents and/or family members who took the time to complete the surveys. There are questions in the survey related to the Ontario Municipal Benchmarking Initiative (OMBI) that support internal and external benchmarking.

The report is respectfully submitted for your information,

Mary,Bateman
Acting Administrator, Huron Lodge

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Ontario Health
Unit of Excellence
Innovation

Ontario Health
Unit of Excellence
Innovation

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Ontario

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T616phone: (411) 327-7309
T616copieur: (411) 212-3142

January 30, 2014

MEMORANDUM TO:

Long-Tenn Care Home A d m In la tr & to rt

FROM:

Patricia Sullivan-Taylor

Director, Health S e P

SUBJECT:

RESOURCE UTILIZA,,_O. GROUP (RUG)-llt(34j: CASI! MIX IP4DElf
(CMI) RESULTS FOR 2012/13

This memo **serves as** notice of your CMI results for 2014115 Nursing and Personal Care (NPC) funding.

The Ministry of Health and Long-Tenn Care (the ministry) has continued to work with the Health System Funding (HSF) Long-Tenn Care (LTC) W o n g Group (Including representatives from the aaaocfatlons and homes) to seek options and advice on the.moat appropriate funding approach that will maintain funding stabliity In th tr or **while**.remnlzlng cha •• In relative home acuity.

For the year commencing April 1 2014• the ministry. confinna the following decisions designed to achieve a b lance between co nu ·system ta illty and acuity change:

(1) To continue the application of the 5% home level limit on Special Rehabilitation (SR) for the purpose of CMI n,sulta for 2014115 NPC Funding. The 5% home level limit on SR means that for CMI calculations, a maximum of 5'Hfof home's assessed days will **be assigned** to SR. Assessed days (If any) above the 5% limit will be assigned to the next highest qualifying non-SR case mix group. Where the S% liml t.exceeded, 1tIO18 SA days that continue to**be recognized** are the SR daysmost favourable to the home those that provide the largest CMI increase to the facility). No assessed **days are** lost.

Please note that the above changes affect only SR and have no effect on nursing rehabilitation also provided to many residents.

The ministry has seen a reduction In the number of assessed days categorized as SR and wm continue with data quality Improvement efforts Implemented In 2013 to enhance data reliability and validity.

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(2) To continue to apply the 5% corridor for CMI results for 2014/15 NPC. The original transition plan indicated that Phase 1-5 homes would move off transition at this point, but the ministry has decided to continue application of the 5% corridor for CMI results while continuing to monitor data quality. Thus, this decision applies to all homes and will be further reviewed to evaluate whether it will continue beyond 2014/15.

(3) To facilitate funding equity across all LTC homes and because all homes have the same mitigation approach, the reference to CMI transition phases will be eliminated. The same methodological approach will be used for funding calculations for all homes from one common funding envelope, regardless of the previous transition phase.

We are providing you with four important numbers. The first number is your RUG-III (34) CMI. This number is calculated from your MOS 2.0 assessments submitted April 2012-March 2013.

The second number is your SR Limited 2013/14 RUG-III (34) CMI calculated as described above and as shown in the attached schedules.

The third number is your Corridor CMI. This number is determined by applying a +/- 5% corridor to the difference between the Adjusted Transition CMI presently appearing in your home's payment notice and your SR Limited 2011/12 RUG-III (34) CMI.

The fourth number is your Funded CMI. This number is determined by applying the re-indexing factor to the Corridor CMI and will be used to adjust your NPC funding starting April 2014. The re-indexing factor is applied to ensure the aggregate funding to all LTC homes is not changed by the case mix funding calculations. The case mix system allocates the funding pot but does not change the size of the pot.

Home Name	Facility Code	# Classified Beds*	12/13 RUG-III (34) CMI	SR Limited 13/14 RUG-III (34) CMI	Corridor CMI	Funded CMI
Huron Lodge	54670	224	0.9819	1.0544	1.031	1.0141

*#Classified Beds and Funded CMI are shown as they will appear in your April 2014 payment notice.

In order to facilitate transparency, we have attached an Excel spreadsheet showing the data used to calculate the numbers for your home.

For your information, the decision on any acuity-based funding increase for the fiscal year 2014/15 will be made in spring 2014. In making this decision, consideration will be given to changing economic circumstances and the needs of the LTC sector. Information on the change in RUG-III (34) CMI at a provincial level will be used to inform this decision.

2014/15 Home Level Funded CMI And Financial Impact Calculator

Home Name: _____

Facility Code: _____

Calculation of Funding_CMI

	Reference	
<u>Special Rehabilitation (SR) Limited Case Mix Index (CMI)</u>	C	1.0544
Prior Year Funded CMI	D	0.9819
<u>% Change</u>	E=C/D-1	7.38%
Corridor Limit on % Change In CMI	F	5.00%
		5.00%
		1.0310
Re-Indexing Factor**	J	0.9836

Estimate Funding_Impact

	2013/2014 Fiscal Year	Reference	2014/2015 Fiscal Year
Nursing and Personal Care Base Per Diem	88.91	a	
Funded CMI	0.9819	R	
# of Classified Beds	224	S	
Calendar Days	365	T	
Estimated Approved Nursing and Personal Care Expenditures:	Q x R x S x T		

Notes:

• 1% is a hypothetical number used for modeling purposes. Actual funding increments are subject to Ministry budget processes.

** The Re-Indexing Factor = sum of previous weighted patient days divided by sum of current weighted patients days for all Ontario long-term care homes with classified beds. For further explanation, refer to Education Sessions.

Disclaimer:

Funding estimator only considers the Impact of CMI on the Nursing and Personal Care envelope

Home level Template
Calculation Qf Special Rehabilitation (SR) limited Case Mix Index (CMI)

Home Name:

Facility Code

Account
Period: 2012/2013 Fiscal Year
Commencing April 1

After Applying

1. SR Limited
Case Mix
Index CMI

C=B/A

1.0544

Additional information about RUG-III (34) classification can be found on the Long-Term Care Homes page at www.hsimj.on.ca. A user name and password are required to access this website. Registration instructions can be found on the upper left hand corner of the home screen. Questions may also be sent to our HSFR Helpline via email HSF@ontario.ca or phone (416) 327-8379.

Thank you for your dedication to creating an equitably funded Long-Term Care system that will continue to deliver quality care for the People of Ontario.

Sincerely,

/ s,.,.,.,. !-,

Patricia Sullivan-Taylor
Director

- c: CEOs, Local Health Integration Network
- Candace Chartier, CEO, Ontario Long-Term Care Association
- Donna A. Rubin, CEO, Ontario Association of Non-Profit Homes and Service for Seniors
- Kathryn McCulloch, A/ADM, Health System Accountability and Performance Division
- Don Young, ADM, Health System Information Management and Investment Division
- Judy Switson, A/Director, LHIN Liaison Branch
- Nancy Lytle, Director, X-ray Safety and Long-Term Care Homes Branch
- Pier Falotico, Director, Financial Management Branch

Attachments



CORPORATION OF THE CITY OF WINDSOR

HURON LODGE
LONG TERM CARE HOME

**2013 RESIDENT FAMILY
SATISFACTION SURVEY REPORT**

SUMMARY OF RESULTS

Report prepared by:

Nancy Musson
Director of Resident Services
and
Lorraine Rousseau
Administrative Clerk

January 2014

HURON LODGE LONG TERM CARE HOME

2013 RESIDENT/FAMILY SATISFACTION SURVEY

INTRODUCTION

Each year Huron Lodge distributes Satisfaction Surveys to residents if they are capable and, if not, their family members and/or their substitute decision makers. This is in order for Huron Lodge to receive feedback in all areas of service provision. We review the responses in order to critique ourselves, seeing what residents feel we do well, and what we may do in order to make improvements.

Throughout 2013 Satisfaction Surveys were distributed at Care Conferences. Under Regulation 79/10 of the Long Term Care Homes Act, 2007, a Care Conference must be held within six weeks of admission and annually thereafter. The format and questions of the Satisfaction Survey are the same, with one being considered the initial, and one being annual. As you can see by the attached survey (Appendix A), there is a place to check off Initial or Annual so we are able to distinguish between the two.

Also mandated on the Satisfaction Survey are three questions that were developed by Ontario Municipal Benchmarking Initiative (OMBI) and are rated and submitted to OMBI for provincial benchmarking. They are:

Do you feel safe in the home?	Yes	No
I would recommend the home to family/friends.	Yes	No

Please indicate your overall rating of the home as a place to live.

Excellent Very Good Good Fair Poor Not Applicable No Response

The Satisfaction Survey is part of the Continuous Quality Improvement Program at Huron Lodge. Each suggestion made or comment about improvement is considered and acted upon as is possible.

In the year 2013 there were 196 annual surveys distributed with 68 of those being returned. The overall response rate for the Annual Care Conferences is 35%.

In this year there were also 61 Initial Care Conference surveys distributed with 9 returned. The return rate is lower, that being only 15%.

SURVEY DESIGN

The survey contains 16 key questions that allow for a rating of "1 - 5", 1 being Strongly Disagree and 5 being Strongly Agree, and a "Not Applicable" category. The "Not Applicable" category may apply, for example, in relation to therapy services or incontinence products. There may be residents who may not utilize some of the programs listed in the questions. All residents do not utilize all programs and services offered at Huron Lodge.

SURVEY RESULTS:

Of the 16 key questions 92% of the responses were "Good" or higher, with the highest 42% falling into the "Very Good" response. Results of the 3 key questions are as follows:

Do you feel safe in the home?

99% said Yes 0% said No and 1% did not respond, meaning 100% of all that responded to the question answered in the affirmative.

The next question:

I would recommend the home to family/friends: 99% said Yes 1% did not respond, meaning 100% of all that responded to the question answered in the affirmative.

For the final question submitted to OMBI for benchmarking:

Please indicate your overall rating of the home as a place to live:

- 53% had an 'Excellent' response rate;
- 43% had a 'Very Good' response rate;
- 3% had a 'Good' response rate;
- 1% had a 'No Response' rate.

Of those that responded, 100% indicated that the overall rating of the home as a place to live noted it "Good", or better.

Statistical finds in the Initial Care Conference responses were in line with the Annual, being 100% of respondents who answered the questions felt safe in the home, would recommend it to others, and rated it as a good, very good, or excellent place to live.

Survell!:_ Results - Overview

An overview of the survey results is noted as follows:

Rating of "1 - 5" 1 being Strongly Disagree and 5 being Strongly Agree

- *Of the 16 key questions 66% of the key questions, had a '5' response rate;*
- *Of the 16 key questions 24% of the key questions, had a "4' response rate;*
- *Of the 16 key questions 4% of the key questions, had a '3' response rate;*
- *Of the 16 key questions 1% of the key questions, had a '2 response rate;*
- *Of the 16 key questions 0% of the key questions, had a '1 response rate;*
- *Of the 16 key questions 3% of the key questions, had a 'Not Applicable' response rate;*
- *Of the 16 key questions 2% of the key questions, had a 'No Response' rate.*

2013 Resident Family
Satisfaction Survey

- *Of the 3 key questions 100% of the key questions, had a 'Yes' response rate;*
- *2 people did not respond, meaning 100% of all that responded to the question answered in the affirmative.*

Survey Results - Numeric Summary

A numeric summary of the survey results follows. Where numbers have been rounded, percentages may not total one hundred. On a survey where no answer was provided it has been recorded as "No Response". Survey responses marked "Not Applicable", were recorded as such.

**CORPORATION OF THE CITY OF WINDSOR
HURON LODGE LONG TERM CARE HOME
RESIDENT/FAMILY SATISFACTION SURVEY 2013**

ANNUAL

INITIAL

The Mission Statement of Huron Lodge:

Huron Lodge is a long term care facility committed to providing compassionate quality care in a home-like setting for those who require 24-hour nursing and personal care.

As an organization it is our responsibility to live up to our Mission Statement in all we do. Having said that, your feedback is important to us. Please answer the following questions as accurately and honestly as you can. It is through your important input that we can change or improve how we care for our residents.

Please rate on a scale of 1 to 5, with 1 being Strongly Disagree and 5 Strongly Agree

I

OVERALL:

	Poor	Fair	Good	Very Good	Excellent	N/A
Please indicate your overall rating of the home as a place to live.						

Any additional comments would be appreciated:

This survey was completed by (please check appropriate box):

Resident Family Member Other *(please specify)*

Would you like to request a meeting with the Administrator? Yes No

OPTIONAL: Please complete the following if you would like us to contact you for additional input or follow up, particularly if you have a concern we can address.

Name:		
Address:		
Telephone Number:		Postal Code:

NUMBER OF 2013 CARE CONFERENCES HELD															
	JAN	FEB	MAR	APRIL	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	YEAR TOTAL	SURVEYS RETURNED	PERCENTAGE RETURNED
INITIAL	7	4	11	3	5	4	3	4	5	5	6	4	61	9	15%
ANNUAL	24	11	15	16	13	14	16	14	20	17	20	16	196	68	35%
TOTAL	31	15	26	19	18	18	19	18	25	22	26	20	257	77	30%

Jan/14 /lr

RESIDENT CARE**ANNUAL****INITIAL**

Opportunities for me to be involved in decisions that relate to my care have been:

RATING		RATING	
66%	5	89%	5
32%	4	11%	4
1%	3	0%	3
0%	2	0%	2
0%	1	0%	1
0%	Not Applicable	0%	Not Applicable
0%	No Response	0%	No Response

Me and/or my family know who to approach when there is a problem:

68%	5	89%	5
25%	4	0%	4
3%	3	11%	3
4%	2	0%	2
0%	1	0%	1
0%	Not Applicable	0%	Not Applicable
0%	No Response	0%	No Response

Staff respect my personal and physical privacy:

63%	5	100%	5
32%	4	0%	4
0%	3	0%	3
0%	2	0%	2
0%	1	0%	1
3%	Not Applicable	0%	Not Applicable
1%	No Response	0%	No Response

Staff provide care in a kind, friendly and caring manner"

69%	5	89%	5
29%	4	11%	4
1%	3	0%	3
0%	2	0%	2
0%	1	0%	1
0%	Not Applicable	0%	Not Applicable
0%	No Response	0%	No Response

	ANNUAL		INITIAL	
Eating				
	62%	5	89%	5
	25%	4	11%	4
	1%	3	0%	3
	0%	2	0%	2
	0%	1	0%	1
	7%	Not Applicable	0%	Not Applicable
	4%	No Response	0%	No Response
Bathing				
	66%	5	100%	5
	28%	4	0%	4
	4%	3	0%	3
	0%	2	0%	2
	0%	1	0%	1
	0%	Not Applicable	0%	Not Applicable
	1%	No Response	0%	No Response
Dressing				
	60%	5	100%	5
	28%	4	0%	4
	3%	3	0%	3
	0%	2	0%	2
	0%	1	0%	1
	6%	Not Applicable	0%	Not Applicable
	3%	No Response	0%	No Response
Toileting				
	59%	5	100%	5

ANNUAL

INITIAL

Physician helpful and available:

57%	5	78%	5
24%	4	0%	4
12%	3	11%	3
1%	2	0%	2
0%	1	0%	1
1%	Not Applicable	11%	Not Applicable
3%	No Response	0%	No Response

Therapy services meet my needs:

66%	5	89%	5
19%	4	11%	4
4%	3	0%	3
1%	2	0%	2
0%	1	0%	1
6%	Not Applicable	6%	Not Applicable
3%	No Response	0%	No Response

Volunteer program enhances Quality of Life of Residents:

68%	5	41%	5
15%	4	29%	4
6%	3	12%	3
0%	2	0%	2
0%	1	0%	1
9%	Not Applicable	12%	Not Applicable
3%	No Response	6%	No Response

Laundry services meet my needs:

63%	5	100%	5
28%	4	0%	4
4%	3	0%	3
1%	2	0%	2
0%	1	0%	1
3%	Not Applicable	0%	Not Applicable
1%	No Response	0%	No Response

Cleanliness and general repair of the building is good:

71%	5	100%	5
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Meals are of good quality and served in a pleasurable manner:

32%	5	100%	5
41%	4	0%	4
19%	3	0%	3
3%	2	0%	2
0%	1	0%	1
4%	Not Applicable	0%	Not Applicable
1%	No Response	0%	No Response

Business transactions and questions regarding my finances are dealt with efficiently and confidentially:

46%	5	89%	St
42%	4	11%	4
7%	3	0%	3
1%	2	0%	2
0%	1	0%	1
3%	Not Applicable	0%	Not Applicable
0%	No Response	0%	No Response

The diversity and availability of Spiritual care programs meets my needs:

29%	5	78%	Excellent
41%	4	11%	Very Good
10%	3	11%	Good
1%	2	0%	Fair
0%	1	0%	Poor
12%	Not Applicable	0%	Not Applicable
7%	No Response	0%	No Response

Do you feel safe and secure in the home?

97%	Yes	100%	Yes
1%	No	0%	No
1%	No Response	0%	No Response

I would recommend the home to family/friends.

99%	Yes	100%	Yes
0%	No	0%	No
1%	No Response	0%	No Response

OVERALL

Please indicate your overall rating of the home as a place to live.

53%	Excellent	89%	Excellent
43%	Very Good	11%	Very Good
3%	Good	0%	Good
0%	Fair	0%	Fair
0%	Poor	0%	Poor
0%	Not Applicable	0%	Not Applicable
1%	No Response	0%	No Response

As the completed surveys were received, suggestions and concerns were forwarded to the respective division manager(s) for consideration and follow-up/evaluation as required. Also, one survey respondent indicated that they wished to meet with the A/Administrator in the final question. They were contacted and a meeting was arranged. At this meeting specific concerns were dealt with.

In reviewing the results of the Annual compared to Initial Surveys, the percentage numbers of positive responses do not vary by a wide margin. In both cases survey results are consistent with a positive attitude about the care residents are receiving at Huron Lodge.

Appendix B (attached) gives a small overview of some of the comments that were made on the surveys. The positive comments are very much appreciated and when negative comments are made follow-up occurs with attempts to improve.

Appendix C (attached) summarizes the overall view of statistics, indicating the number of respondents and the percentage achieved

WRITTEN COMMENTS

FROM HURON LODGE 2013 ANNUAL SATISFACTION SURVEY

PLEASE NOTE: Comments are written *EXACTLY* as noted by survey respondents. Names have been omitted for purposes of confidentiality.

ADDITIONAL COMMENTS

Positive

- No, everything is quite satisfactory.
- Thank you to the staff and management for the excellent care that you all provide for my brother.
- Staff are caring, pleasant, helpful. Thank you.
- Thanks for calling me for any concerns. I wish I could help more.
- I hope that Huron Lodge continues and will be available for my personal needs in the future.
- Thank you to the entire staff for caring, professional services.
- Care is wonderful. Staff and volunteers are exceptional. Father considers it "home".
- The attitude of staff/employees is wonderful to see. At change of shift they are happy when they leave, but those coming in are just as happy.
- Completely satisfied with all areas of care.
- Staff and employees, security, etc., are all top notch, pleasant and helpful.
- On behalf of the family we have been very happy and most appreciative of the excellent caring manner my Mom encounters. It means so much to us that she is well taken care of by all of you. Thank you.
- We are very fortunate to have a place at Huron Lodge. The care and staff are excellent.
- I appreciate everything the staff is doing for my Mom.

Neutral

- Consider making SKYPE available for family members far away and unable to be here. Would greatly help if we had internet even available.
- More recreation programs geared to residents who are younger (under 60 yrs.) These are an increasing group and should have their ages in consideration of entertainment and crafts. More computers geared to visually handicapped residents.
- Would like to get reports from the doctor, or on occasion talk to him directly on my father's condition.
- Grounds outside are not resident friendly. The ramps leading to the sidewalks require wheelchair bound residents to use the parking lot to safely use the ramps. Need more outdoor accessible spaces which are closer to the building.

Neg_ative

- During Lent Fridays should have a non-meat soup. Some staff still give me a hard time about being present in the room. Day staff don't smile. Laundry has lost 3 socks. Temporary afternoon staff threw away black socks and undershirt. I retrieved the bib, washcloths, grey socks. Navy blue sweatshirt from Christmas still missing. Laundry gave donation to replace.
- Baths are given too quickly.
- Some of my sister's belongings have gone missing over 2 years, including the remote for her TV set. I mentioned it to the staff but it was never found.
- Too many fruit plates.
- Heat the water to wash with in the morning.

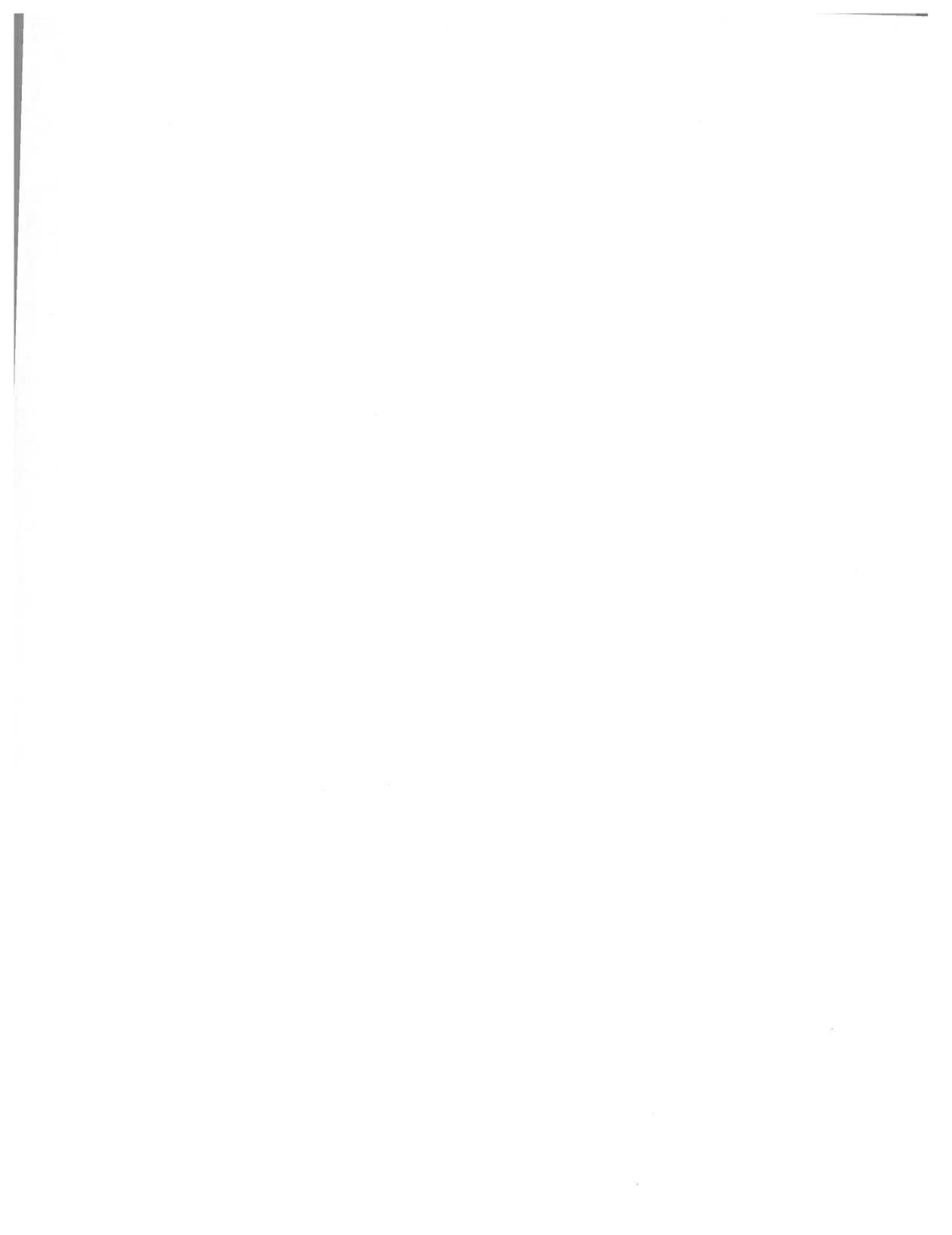
END

2013 ANNUAL SATISFACTION SURVEY STATISTICS

	1	2	3	4	5	INIAi	N/R	TOTAL
<u>OPPORTUNITIES TO BE INVOLVED</u>				11	22	45		68
PERCENTAGE				1%	32%	66%		99%
<u>WHO TO APPROACH WHEN THERE'S A PROBLEM</u>		3	2	17	46			68
PERCENTAGE		4%	3%	25%	68%			100%
<u>RESPECT PERSONAL AND PHYSICAL PRIVACY</u>				22	43	2	1	68
PERCENTAGE				32%	63%	3%	1%	99%
<u>PROVIDE CARE KIND, FRIENDLY & CARING MANNER-</u>			1	20	47			68
PERCENTAGE			1%	29%	69%			99%
<u>HELP WITH EATING</u>			1	17	42	5	3	68
PERCENTAGE			1%	25%	62%	7%	4%	99%
<u>HELP WITH BATHING</u>			3	19	45		1	68
PERCENTAGE			4%	28%	66%		1%	99%
<u>HELP WITH DRESSING</u>			2	19	41	4	2	68
PERCENTAGE			3%	28%	60%	6%	3%	100%
<u>HELP WITH TOILETING</u>		11	21	181	401	5	21	68
PERCENTAGE		1%	3%	26%	59%	7%	3%	99%
<u>PHYSICIAN HELPFUL AND AVAILABLE</u>	1	1	8	16	39	1	2	68
PERCENTAGE	1%	1%	12%	24%	57%	1%	3%	99%
<u>THERAPY SERVICES MEET NEEDS</u>		11	31	131	451	4	21	68
PERCENTAGE		1%	4%	19%	66%	6%	3%	99%
<u>VOLUNTEERS' SERVICES ENHANCE QUALITY OF LIFE</u>			4	10	46	6	2	68
PERCENTAGE			6%	15%	68%	9%	3%	101%
<u>LAUNDRY SERVICES MEET MY NEEDS</u>		1	3	19	43	2		68
PERCENTAGE		1%	4%	28%	63%	3%		99%
<u>CLEANLINESS & GENERAL REPAIR OF HOME IS GOOD</u>			4	16	48			68
PERCENTAGE			6%	24%	71%			101%
<u>MEALS OF GOOD QUALITY AND PLEASURABLE</u>		1	5	16	45	1		68
PERCENTAGE		1%	7%	24%	66%	1%		99%
<u>BUSINESS TRANSACTIONS/FINANCE EFFICIENT</u>				12	54	2		68
PERCENTAGE				18%	79%	3%		100%
<u>SPIRITUAL CARE PROGRAMS MEET MY NEEDS</u>			1	8	47	5	7	68
PERCENTAGE			1%	12%	69%	7%	10%	99%

SURVEY COMPLETED BY

OVERALL RATING	EXC I	I GOOD	FAIR	POOR	INIAi	N/R	TOTAL
	36						
OVERALL PERCENTAGE	53%						



CORPORATION OF THE CITY OF WINDSOR

HURON LODGE
LONG TERM CARE HOME

2013 INITIAL
RESIDENT FAMILY SATISFACTION SURVEY

SUMMARY OF RESULTS

Report prepared by:

Lorraine Rousseau
Administrative Clerk

January 2014

WRITTEN COMMENTS

FROM HURON LODGE 2013 INITIAL SATISFACTION SURVEY

PLEASE NOTE: Comments are written *exactly* as noted by survey respondents. Names have been omitted for purposes of confidentiality.

ADDITIONAL COMMENTS

Positive

- My sister-in-law, brother-in-law and myself found the Care Conference very informative. Everyone at Huron Lodge is very helpful and pleasant.
- So far everything and everyone has been excellent and I would like to take this opportunity to say thank you.
- This is an amazing, caring home. My aunt was welcomed with love and has adjusted very quickly to her new environment, and seems very happy.

END

2013 INITIAL SATISFACTION SURVEY STATISTICS

	1	2	3	4	5	N	I	Ai	N/R	TOTAL
<u>OPPORTUNITIES TO BE INVOLVED</u>				1	8					9
PERCENTAGE				11%	89%					100%
<u>WHO TO APPROACH WHEN THERE'S A PROBLEM</u>			1		8					9
PERCENTAGE			11%		89%					100%
<u>RESPECT PERSONAL AND PHYSICAL PRIVACY</u>					9					9
PERCENTAGE					100%					100%
<u>PROVIDE CARE KIND, FRIENDLY & CARING MANNER</u>				1	8					9
PERCENTAGE				11%	89%					100%
<u>HELP WITH EATING</u>					9					9
PERCENTAGE					100%					100%
HELP WITH BATHING					9					9
PERCENTAGE					100%					100%
HELP WITH DRESSING					9					9
PERCENTAGE					100%					100%
HELP WITH TOILETING					9					9
PERCENTAGE					100%					100%
PHYSICIAN HELPFUL AND AVAILABLE			1		7	1				9
THERAPY SERVICES MEET NEEDS										
PERCENTAGE				11%	89%					100%
<u>VOLUNTEERS' SERVICES ENHANCE QUALITY OF LIFE</u>				1	8					9
PERCENTAGE				11%	89%					100%
<u>LAUNDRY SERVICES MEET MY NEEDS</u>										
PERCENTAGE										
<u>CLEANLINESS & GENERAL REPAIR OF HOME IS GOOD</u>										
PERCENTAGE										
<u>MEALS OF GOOD QUALITY AND PLEASURABLE</u>										
PERCENTAGE										
<u>BUSINESS TRANSACTIONS/FINANCE EFFICIENT</u>										
PERCENTAGE										
<u>SPIRITUAL CARE PROGRAMS MEET MY NEEDS</u>										
PERCENTAGE										

SURVEY COMPLETED BY

FEEL SAFE & SECURE IN THE HOME	9					91	100%
RECOMMEND HOME TO OTHERS	9					91	100%
<u>REQUEST A MEETING</u> WITH ADMINISTRATOR			9			91	100%

OVERALL RATING	EXCEL: 61					GOOD	FAIR	POOR	N/A	N/R	TOTAL
	81	11									9
OVERALL PERCENTAGE	89%	11%									100%