The Corporation of the City of Kawartha Lakes Agenda Victoria Manor Committee of Management Meeting

VMC2022-001

Monday, January 17, 2022

Meeting Commencing at 1:00 PM - Electronic Participation

Victoria Manor Boardroom

Victoria Manor, Second Floor

220 Angeline Street South, Lindsay, Ontario

Members:

Councillor Doug Elmslie
Councillor Patrick O'Reilly
Councillor Kathleen Seymour-Fagan

Please note that this will be an electronic participation meeting and public access to a meeting space is not available. Should you wish to view the proceedings of the meeting please contact Holly Russett at hrussett@kawarthalakes.ca to request a copy of the zoom invitation for the meeting.

If you have any questions about this electronic participation meeting, please contact Holly Russett at hrussett@kawarthalakes.ca.

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		Pages
1.	Call to Order	
2.	Adoption of Agenda	
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9.	Closed Session	
9.1.	Closed Minutes, Victoria Manor Committee of Management, November 15, 2021, Municipal Act, 2001 s.239(2)(b)(d)(g)	
9.2.	Victoria Manor Confidential Operations Report to Committee of Management, November and December 2021, Municipal Act, 2001 s.239(2)(b)(d)(e)	
10.	Matters from Closed Session	
11.	Other New Business	
11.1.	Operational Verbal Update - Pam Kulas	
12.	Next Meeting	
	March 21, 2022, Victoria Manor Boardroom or Electronic Video, commencing at 1:00 p.m.	
13.	Adjournment	

The Corporation of the City of Kawartha Lakes Minutes

Victoria Manor Committee of Management Meeting

VMC2021-006 Monday, November 15, 2021 1:00 P.M. Electronic Participation

Members:

Deputy Mayor Patrick O'Reilly Councillor Doug Elmslie Councillor Kathleen Seymour-Fagan

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1. Call to Order

Councillor Elmslie called the meeting to order at 1:00 p.m. Deputy Mayor P. O'Reilly was in attendance.

Executive Director Pamela Kulas, Director Rod Sutherland and Executive Assistant Holly Russett were also in attendance.

Absent: Councillor K. Seymour-Fagan, Sienna Senior Living VP Operations and Long-Term Care Jennifer Powley

2. Adoption of Agenda

VMCM2021-055

Moved By Deputy Mayor O'Reilly **Seconded By** Councillor Elmslie

That the agenda be adopted as circulated.

Carried

3. Disclosures of Pecuniary Interest

There were no declarations of pecuniary interest disclosed.

4. Deputations and Presentations

None

5. Approval of the Minutes of the Previous Meeting

VMCM2021-056

Moved By Councillor Elmslie

Seconded By Deputy Mayor O'Reilly

That the minutes of the Victoria Manor Committee of Management meeting held on September 20, 2021, be adopted as circulated.

Carried

6. Business Arising from Previous Meetings

6.1 2022 Budget Update

Director Sutherland gave an update on the 2022 Budget via a brief presentation.

VMCM2021-057

Moved By Deputy Mayor O'Reilly **Seconded By** Councillor Elmslie

That the 2022 Budget Update by Director Sutherland, be received for information.

Carried

7. Correspondence

None

8. Reports

8.1 Memorandum 005 - Ministry of Long-Term Care Funding to Increase Staffing Levels

VMCM2021-058

Moved By Councillor Elmslie
Seconded By Deputy Mayor O'Reilly

That the November 15, 2021 Memorandum 005 from Pamela Kulas, regarding Ministry of Long-Term Care Funding to Increase Staffing Levels, be received.

Carried

8.2 Memorandum 006 - 2022 Proposed Meeting Dates

VMCM2021-059

Moved By Deputy Mayor O'Reilly **Seconded By** Councillor Elmslie

That the November 15, 2021 Memorandum 006 from Rod Sutherland, regarding 2022 Proposed Meeting Dates, be received.

Carried

8.3 Victoria Manor Operations Report to Committee of Management, September and October 2021

VMCM2021-060

Moved By Deputy Mayor O'Reilly **Seconded By** Councillor Elmslie

That the Victoria Manor Operations Report to Committee of Management, September and October 2021, provided by Sienna Senior Living, be received for information.

Carried

9. Closed Session

VMCM2021-061

Moved By Deputy Mayor O'Reilly **Seconded By** Councillor Elmslie

That the Victoria Manor Committee of Management convene into closed session in order to consider matters on the Monday, November 15, 2021 Closed Session Agenda and that are permitted to be discussed in a session closed to the public pursuant to Section 239(2)(b)(d)(e) of the Municipal Act, S.O. 2001. S.25

Carried

10. Matters from Closed Session

None

11. Other New Business

Director Sutherland reported the Mayor received a letter from the Ministry of Long-Term Care, stating that Victoria Manor as a municipal home we are not required to re-develop before 2025. Victoria Manor is required and does meet all requirements in the Long-Term Care Homes Act and all applicable legislation. Recommendations may come forward including, a strategy to determine the building life span and re-development over the next 10-15 years.

Director Sutherland shared recommendations in September from an earlier review that the call bell system was identified to be part of the 2023 Capital Budget. Since then a number of things have come to light and further review, it has been identified that the system may not last that long. There are a few options being reviewed over the next couple weeks and recommendations will be brought forward for the 2022 Budget.

For the Christmas Season, each home area is decorating and hosting a "Resident Family Christmas Tour". A silent auction and goodies as families exit the building are being organized. The Residents will have their annual Christmas dinner on the 25th.

12. Next Meeting

January 17, 2022, Victoria Manor Boardroom, commencing at 1:00 p.m.

13. Adjournment

VMCM2021-062

Moved By Deputy Mayor O'Reilly **Seconded By** Councillor Elmslie

That the Victoria Manor Committee of Management Meeting adjourn at 1:31 p.m.

Carried



November and December 2021 Victoria Manor Operations Report to Committee of Management

Submission Date: January 17, 2022

Information for the Months of: November and December 2021

Table 1: Victoria Manor Executive Summary Statement of Earnings for November 2021

	Year-to-Date Actual	Year-to-Date Budget	Year-to-Date Variance
Resident Days	49,681	54,612	(4,931)
Occupancy %	89.6%	98.5%	(8.9%)
Nursing Envelope Funds	6,396,941	6,395,715	1,227
Nursing Expenses	7,008,364	8,131,199	1,122,835
Net Nursing Envelope	611,423	1,735,484	1,124,061
Program Envelope Funds	678,115	673,055	5,060
Program Expenses	639,616	702,994	63,378
Net Program Envelope	38,499	29,939	68,438
Food Envelope Funds	534,622	528,936	5,686
Food Expenses	531,489	528,936	(2,553)
Net Food Envelope	3,133	-	3,133
Accommodation Revenue	3,746,274	3,857,633	(111,359)
Accommodation Expenses			
Dietary Expenses	1,120,264	1,222,104	101,840
Housekeeping Expenses	590,443	545,845	(44,598)
Laundry Expenses	216,753	223,311	6,558
Maintenance Expenses	429,454	625,087	195,633
Administration Expenses	440,414	490,094	49,680
Facility Expenses	945,993	1,006,969	60,977

	Year-to-Date Actual	Year-to-Date Budget	Year-to-Date Variance
Accommodation Expenses	3,743,321	4,113,411	370,089
Pandemic Revenue	1,405,547	-	1,405,547
Pandemic Expenses	1,382,406	109,808	1,272,597
Net Pandemic Expenses	23,142	109,808	132,950
Net Operating Income	546,830	2,131,009	1,584,179
Capital Reserve	113,605	-	113,605
Net Income (Loss)	660,435	2,131,009	1,470,574

Variance Explanations

Nursing Revenue: Year-to-Date (YTD) is favorable (\$1K) mainly due to higher level of care (\$43K), higher high-intensity claims (\$2K), higher direct care funding (\$100K), higher allied health professional funding (\$19K); offset by lower pay equity funding (\$19K), lower BSO funding (\$138K), and lower falls prevention (\$5K).

Pandemic: Year to Date Pandemic net impact is favourable (\$132K)

Nursing Expenses – Direct: YTD are favorable (\$739K) mainly due to lower RN wages (\$361K), lower PSW wages (\$85K), lower BSO wages (\$164K), lower MDS RAI wages (\$30K), lower benefits (\$153K); offset by higher RPN wages (\$3K), and higher agency wages (\$50K).

Nursing Expenses – Administration: YTD are favorable (\$384K) mainly due to lower wages (\$197K), lower benefits (\$72K), lower MDS RAI (\$14K), lower IT allocation (\$6K), lower computer expenses (\$1K), lower falls prevention equipment (\$5K), lower equipment expenses (\$1K), lower medical supplies (\$110K), lower travel costs (\$3K); offset by higher high-intensity (\$2K), higher incontinent supplies (\$15K), and higher one-time funding expense-BSO training (\$8K).

Program Revenue: YTD Program is favorable (\$5K) mainly due to higher level of care funding (\$133K); offset by lower pay equity funding (\$1K), and lower physio funding (\$127K).

Program Expenses: YTD Program expenses are favorable (\$63K) mainly due to lower wages (\$36K), lower benefits (\$13K), lower IT allocations (\$2K), lower physio (\$3K),

lower purchased services (\$3K), lower supplies (\$10K), lower transportation costs (\$2K); offset by higher staff costs (\$6K).

Food Revenue: YTD Food revenue is favorable (\$1K).

Food Expenses: YTD Food expense are unfavorable (\$3K).

Accommodation Revenue: YTD revenue is unfavorable (\$111K) mainly due to lower basic accommodation (\$51K), lower preferred accommodation (\$42K), lower miscellaneous income (\$6K), lower other income from hair care (\$5K), lower prior period LTC reconciliation (\$5K), and lower pharmacy (\$2K).

Dietary Expenses: YTD Dietary expenses are favorable (\$102K) mainly due to lower wages (\$79K), lower benefits (\$20K), lower equipment expenses (\$3K), lower supplies (\$1K); offset by lower recovered costs (\$2K).

Housekeeping Expenses: YTD Housekeeping expenses are unfavorable (\$45K) mainly due to higher wages (\$5K), higher chemical and cleaning supplies (\$25K), higher supplies (\$23K); offset by lower benefits (\$2K), and lower equipment expenses (\$6K).

Laundry Expenses: YTD expenses are favorable (\$7K) mainly due to lower wages (\$10K), lower equipment (\$5K); offset by higher benefits (\$2K), and higher laundry supplies (\$6K).

Maintenance Expenses: YTD Maintenance expenses are favorable (\$196K) mainly due to lower wages (\$53K), lower benefits (\$9K), lower alarm (\$4K), lower chemical and cleaning supplies (\$3K), lower electrical (\$12K), lower minor capital equipment (\$113K), lower grease trap cleaning (\$1K), lower landscaping and snow removal (\$13K), lower contracted services (10K), lower plumbing (\$3K), lower supplies (\$8K); offset by higher building repair (\$1K), higher elevator expenses (\$4K), higher equipment (\$25K), and higher fire system (\$2K).

Administration Expenses: YTD Administration are favorable (\$50K) mainly due to lower bad debts (\$12K), lower bank charges (\$17K), lower communications expenses (\$1K), lower computer expenses (\$10K), lower software and software subscriptions (\$23K), lower professional fees (\$28K), lower purchased services (\$46K), lower supplies (\$8K), lower travel (\$2K), lower promotions (\$1K); offset by higher wages (\$42K), higher benefits (\$16K), higher association fees (\$1K), higher collection costs (\$1K), higher IT allocation (\$6K), higher office equipment expenses (\$29K), and higher staff costs (\$3K).

Facility Expenses: YTD Facility expenses are favorable (\$61K) mainly due to lower gas (\$10K), lower hydro (\$131K including rebate credit of \$49K), lower water (\$2K); offset by higher cable (\$1K), higher management fees (\$73K), and higher waste removal (\$8K).

Table 2: Year to Date Capital Expenses: November 2021

Capital Expense	Approved 2021 Budget	Year-to-Date Expenses
Wanderguard System	15,000	
Whirlpool Bath Tub	35,000	35,000
Portable Lifts (2)	30,000	30,000
Air conditioning cooling units in serveries	13,000	Delayed
Food Processor	6,000	5,000
Hand held devices	944	
Repair and replacement of existing outdoor walkways	23,000	25,000
Totals	122,944	

Scorecard: Quality

Table 3: Canadian Institute for Health Information (CIHI) quarter 4 (January to March 2021) results.

Indicator	2021 Q4 Current Performance	Target
Antipsychotic medications	21.90	19.50
Worsened stage 2-4 pressure ulcers	1.60	2.50
Has fallen	14.00	16.50
Daily physical restraints	3.20	2.90
Has pain	5.20	5.50
Worsened pain	5.60	9.40
Percentage of complaints received by a LTCH that were acknowledged to the individual who made a complaint within 10 business days.	100	100
Transfers to Emergency department (note Q1-Q4 2019)	10.8	23.00

Indicators are monitored monthly during Resident Safety meetings. Action plans are in place.

Scorecard: People

Employee Engagement

- Several team members were recognized in November and December by residents and peers through the Spot A Star program.
- Various activities throughout December held for team members

Projects, Location Events and Other

- Implemented Integrated Medication Management Program
- Implemented Skin and Wound App

Long Term Care Update

Occupancy (data since last report)

- 89.6% occupancy
- 1 Discounted Private or Semi–private beds (under 60%)
- 10 move ins and 13 discharges

Regulatory visits i.e. MOL, Public Health

Ministry of Health Inspection Report has been received. 1 Order cleared. 1 Written Notification and 1 Voluntary Plan of Correction received. Report to be presented in March 2022

Written and Verbal Complaints Summary

Written complaint received from a resident family who expressed concerns other residents wandering into residents room. Complaint resolved.

Written complaint received from a family member who had concerns that the staff at the home are not required to be fully vaccinated. Complaint resolved.

Written complaint received from a resident family who feels that we are not doing enough to treat residents illness. Complaint resolved.

Written complaint received from a family member who felt that a team member spoke rudely and acted inappropriately when removing resident from an unsafe situation. Complaint resolved.

Verbal complaint received from a family member who expressed concerns that because of the vaccination directive is in place visiting indoors was not permitted. Complaint resolved.

Compliments Summary

Many cards and emails of thank you received from families for the wonderful care provided by team members.

Occupational Health and Safety Issues

Nothing to report.

Resident and Family Satisfaction Survey

Christmas Tours held for residents and families to celebrate Christmas. Very well received.

Resident and Family Satisfaction Surveys completed in September. Results received.

Resident/Family Council Updates

Family Council has new President co-chairs.

Family virtual town hall meetings held November 30.

Emergency Preparedness and Environmental concerns

Code Red drills were held on all three (3) shifts in November and December 2021.

All emergency codes tested on all 3 shifts in 2021.

The Corporation of the City of Kawartha Lakes Victoria Manor Committee of Management Report VMC2022-01

Meeting Date: January 17, 2022

Meeting Time: 1:00 p.m.

Meeting Place: Electronic Video Meeting

Subject: 2021 Victoria Manor Resident Satisfaction Survey

Author Name and Title: Pam Kulas, Executive Director

Recommendation(s):

Resolved That Report VMC2022-01, "2021 Victoria Manor Resident Satisfaction Survey", be received.

Background:

Align, the third party firm was chosen to administer the 2021 Resident Satisfaction Survey. In addition to the questions regarding satisfaction, this survey also analyzes the domains of resident satisfaction. Evidence based survey theory is used to weight questions and determine the areas of care and service delivery that have the greatest influence on satisfaction. Surveys for residents who were able to complete the survey were hand delivered.

The survey tool offered a total of 33 questions of which 21 questions were organized into the domains of care quality, quality of life, care responsiveness, communication, dining experience and environment. Domains are often driven by common systems and processes which provide an understanding of how effectively systems and processes are functioning. The survey also included 2 global measure questions related to overall satisfaction and 10 questions specifically related to organization specific services. For each domain, residents were able to provide comments.

Residents rated each using the agreement scale of "Strongly Agree", "Agree", "Disagree" and "Strongly Disagree".

A total of 81 surveys were distributed to residents and 70 were completed for a response rate of 86%. The average response rate was 100% in 2020.

The average age of the residents living at Victoria Manor is between 84-89 years old and the average number of years spent in the home is approximately 1.5 years. Circumstances that cause people to enter into Long Term Care are: advanced age, poor health and their ability to function, and requiring assistance with activities of daily living. The onset of dementia, incontinence and the effects of a stroke increase the likelihood of moving into a long term care home.

Results:

Results of the survey were compared to all long term care homes owned and managed by Sienna Senior Living, where more than 11,000 seniors live.

Resident Satisfaction

The overall 2021 Resident satisfaction positive response rate for the questions "overall quality of services" and "recommendation to others" was 82% compared to the 2020 Resident satisfaction score of 95%, a decrease of 13%. The overall Resident satisfaction score among Sienna Senior Living was 82%.

Of the 33 questions offered, 29 scores were at or better than the Sienna average.

The 4 scores below the Sienna average are:

- I am satisfied with the quality of laundry services at this care community
- Meals are served in a pleasant atmosphere.
- I am satisfied with the Nurse Practitioner Services at this care community
- I have opportunities to communicate with my family and friends during this pandemic

The next step in the process is to review the results with Residents Council. The results of those discussions will form an action plan to improve areas that stakeholders are most concerned about.

Attachments A:

Victoria Manor Resident Satisfaction Results 2021

Director: Rod Sutherland

Phone: 705-324-9870 ext. 3206

E-Mail: rsutherland@kawarthalakes.ca

CARE COMMUNITY

RESIDENT EXPERIENCE SURVEY

Data begins:

Data ends:

Date reported:

AUG 13, 2021 OCT 21, 2021OCT 26, 2021

COMPREHENSIVE REPORT

ANALYSIS PREPARED FOR

SIENNA SENIOR LIVING

JP

VICTORIA MANOR

220 Angeline Street South • Lindsay, ON K9V 5E9

This report summarizes your survey results. The charts and graphs selected by your organization provide important information necessary to identify opportunities for improvement, as well as areas in which respondents feel you do well.

Surveys created:

81

Surveys received:

70

Response rate:

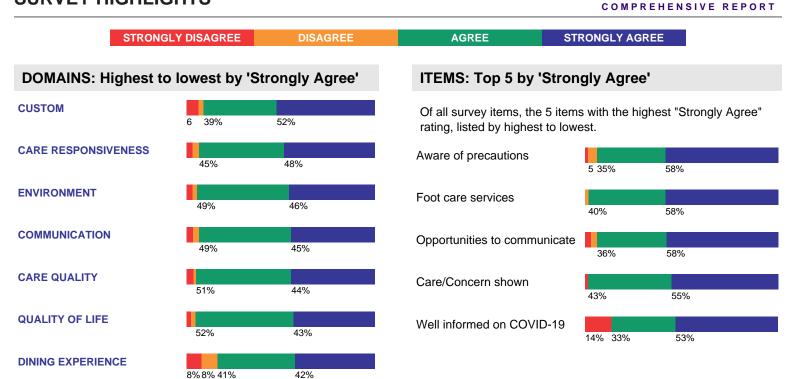
86%



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Data begins: AUG 13, 2021 Data ends: OCT 21, 2021 Date reported: OCT 26, 2021

SURVEY HIGHLIGHTS



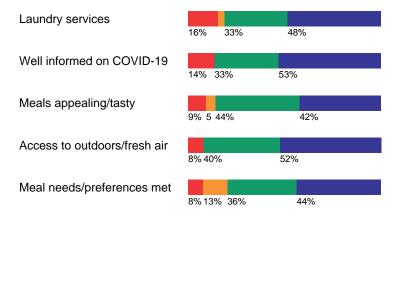
COMMENTS: Top words

ITEM: What are three words you would use to describe your experience at our care community?

good	15
fine	13
nice	7
fun	5
caring	4
ok	3
clean	2
excellent	2
fair	2
happy	2
helpful	2
kind	2
lovely	2
no	2

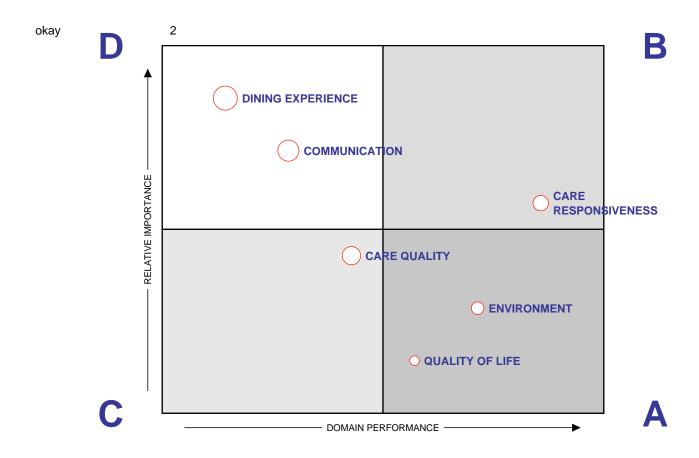
ITEMS: Bottom 5 by 'Strongly Disagree'

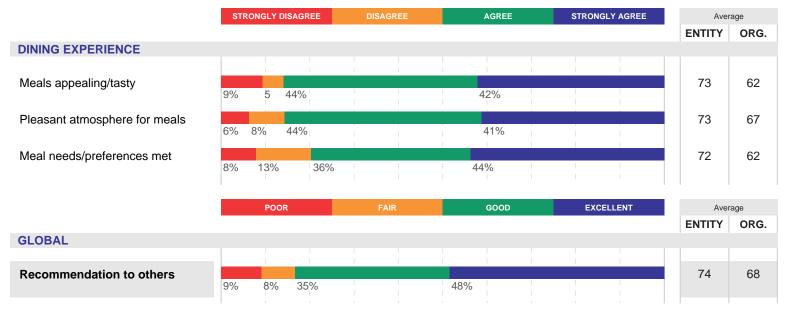
Of all survey items, the 5 items with the highest "Strongly Disagree" rating, listed by highest to lowest.



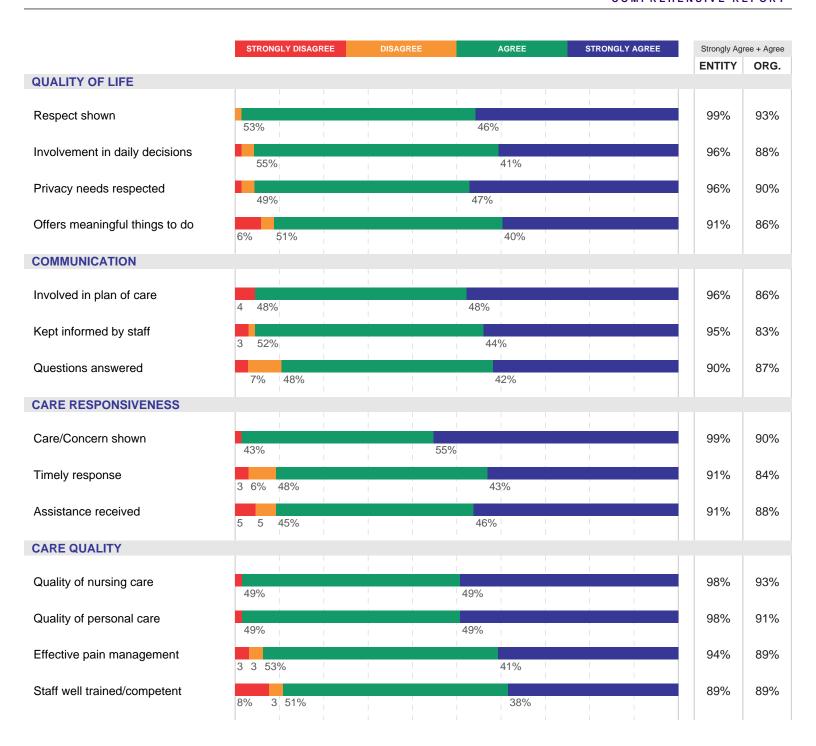
COMPREHENSIVE REPORT

DOMAIN PRIORITY MAP





COMPREHENSIVE REPORT



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CARE COMMUNITY RESIDENT EXPERIENCE SURVEY

RATINGS BY DOMAIN



Continued from previous page



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CARE COMMUNITY RESIDENT EXPERIENCE SURVEY

RATINGS BY DOMAIN



COMPREHENSIVE REPORT

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Data begins: AUG 13, 2021 Data ends: OCT 21, 2021 Date reported: OCT 26, 2021

COMPREHENSIVE REPORT

RATINGS BY DOMAIN

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CARE COMMUNITY RESIDENT EXPERIENCE SURVEY

Data begins: AUG 13, 2021 Data ends: OCT 21, 2021 Date reported: OCT 26, 2021

RATINGS BY DOMAIN

COMPREHENSIVE REPORT



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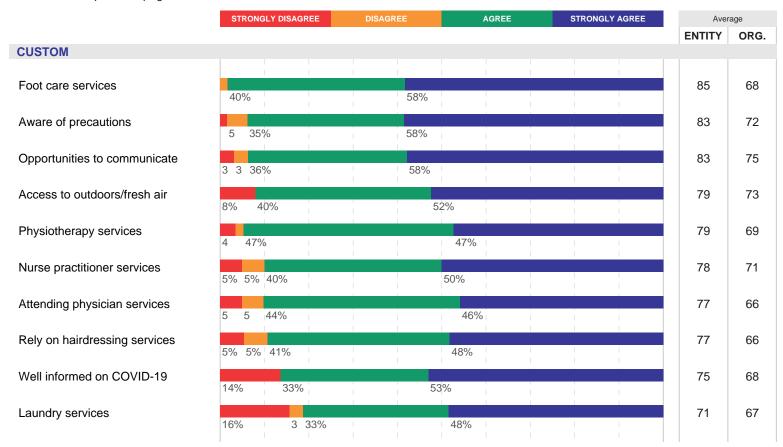
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CARE COMMUNITY RESIDENT EXPERIENCE SURVEY

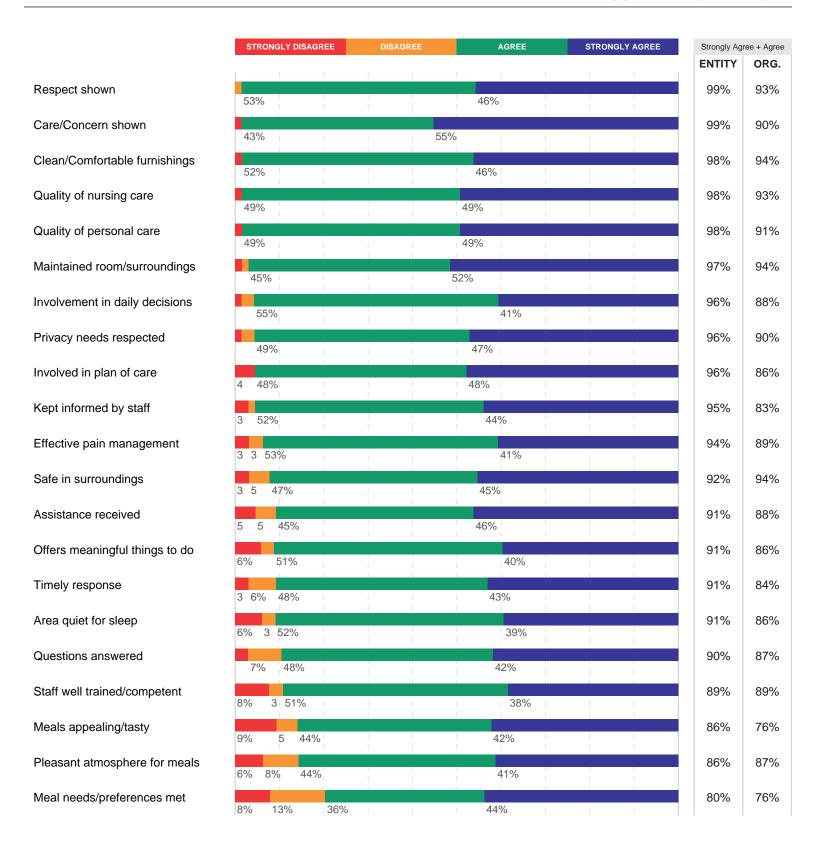
RATINGS BY DOMAIN



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COMPREHENSIVE REPORT



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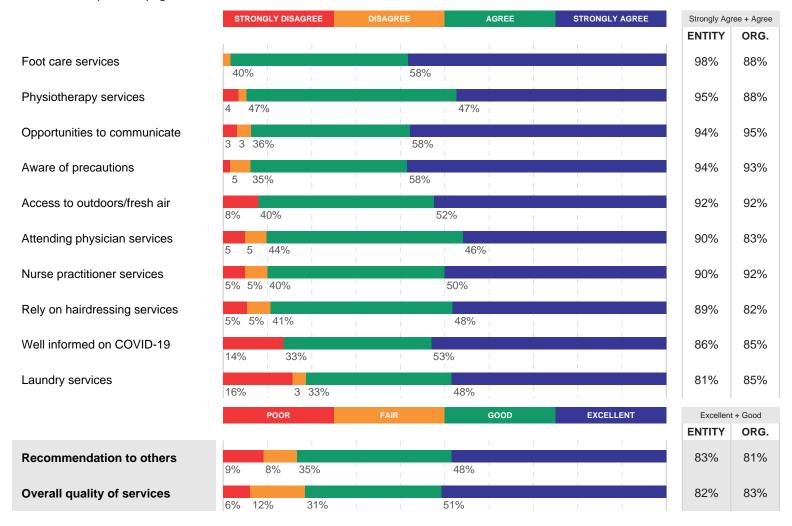
CARE COMMUNITY RESIDENT EXPERIENCE SURVEY

Data begins: AUG 13, 2021 Data ends: OCT 21, 2021 Date reported: OCT 26, 2021

COMPREHENSIVE REPORT

RATINGS BY ITEM

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CARE COMMUNITY RESIDENT EXPERIENCE

SURVEY ITEMS BY DOMAIN

ITEM NO.	LABEL	ITEM AS IT APPEARS ON THE SURVEY	
CARE (QUALITY		
11 12 13 14	Quality of nursing care Quality of personal care Staff well trained/competent Effective pain management	The nurses provide high-quality nursing care. The personal support workers / health care aides provide high-quality care. Staff is well trained and competent. My pain is managed effectively.	
QUALI	TY OF LIFE		
1 2 3 4	Respect shown Involvement in daily decisions Offers meaningful things to do Privacy needs respected	Staff behave respectfully toward residents and families. My preferences and choices are incorporated into my daily routine. I am offered opportunities for meaningful things to do. My need for privacy is respected.	
CARE F	RESPONSIVENESS		
8 9 10	Timely response Care/Concern shown Assistance received	My requests are responded to in a timely fashion. Staff show care and concern for my needs. I receive all the assistance that I need.	
COMN	IUNICATION		
5 6 7	Questions answered Involved in plan of care Kept informed by staff	My questions are answered to my satisfaction. My family and I are actively involved in my plan of care. Staff keep me informed of information that affects me.	
DINING	S EXPERIENCE		
19 20 21	Meals appealing/tasty Meal needs/preferences met Pleasant atmosphere for meals	Meals served to me are appealing and tasty. Meals meet my needs and preferences. Meals are served in a pleasant atmosphere.	
ENVIR	ONMENT		
15 16 17 18	Maintained room/surroundings Area quiet for sleep Clean/Comfortable furnishings Safe in surroundings	My room and surroundings are clean and well maintained. The area around my room is kept quiet for sleep. The furnishings are clean and comfortable. I feel safe in my surroundings.	
GLOBA	NL		
22 23	Recommendation to others Overall quality of services	Overall, how would you recommend this care community to others? How would you rate the overall quality of services provided by this care community?	
ORGANIZATION-SPECIFIC			
24 25 26 27 28 29 30 31 32 33	Laundry services Foot care services Physiotherapy services Attending physician services Nurse practitioner services Rely on hairdressing services Access to outdoors/fresh air Well informed on COVID-19 Aware of precautions Opportunities to communicate	I am satisfied with the quality of laundry services at this care community. I am satisfied with the foot care services at this care community (as applicable). I am satisfied with the physiotherapy services at this care community (as applicable). I am satisfied with the Attending Physician services at this care community (as applicable). I am satisfied with the Nurse Practitioner Services at this care community (as applicable). I rely on hairdressing services at this care community. I have access to outdoor spaces and fresh air. I am kept informed about the impact of COVID-19 within the care community. I am aware of the precautions taken to protect me during this pandemic. I have opportunities to communicate with my family and friends during this pandemic.	

COMMENTS:

CARE QUALITY What could we do to improve the way we provide care?

QUALITY OF LIFE What could we do to improve your quality of life?

CARE RESPONSIVENESS What could we do to improve the way we respond to your needs?

COMMUNICATION What could we do to improve our communication with residents and families?

DINING EXPERIENCE What could we do to enhance our dining services?

ENVIRONMENT What could we do to enhance the environment at our care community?

GLOBAL: THREE WORDS What are three words you would use to describe your experience at our care community?

GLOBAL Any other comments?

The Corporation of the City of Kawartha Lakes Victoria Manor Committee of Management Report VMC2022-02

Meeting Date: January 17, 2022

Meeting Time: 1:00 p.m.

Meeting Place: Electronic Video Meeting

Subject: 2021 Victoria Manor Family Satisfaction Survey Author Name and Title: Pamela Kulas, Executive Director

Recommendation(s):

Resolved That Report VMC2022-02, "2021 Victoria Manor Family Satisfaction Survey", be received.

Director	Other

Background:

Align, the third party firm was chosen to administer the 2021 Family Satisfaction Survey. In addition to the questions regarding satisfaction, this survey also analyzes the domains of resident satisfaction. Evidence based survey theory is used to weight questions and determine the areas of quality of service and dining experience that have the greatest influence on satisfaction. Surveys for families who were able to complete the survey were hand delivered.

The survey tool offered a total of 27 questions of which 23 questions were organized into the domains of care quality, quality of life, quality of service, dining experience and environment. Domains are often driven by common systems and processes which provide an understanding of how effectively systems and processes are functioning. The survey also included 4 global measure questions related to overall satisfaction. For each domain, family members were able to provide comments.

Families rated each using the agreement scale of "Strongly Agree", "Agree", "Disagree" and "Strongly Disagree".

A total of 168 surveys were available for Families and 83 were completed for a response rate of 49%. The average response rate in 2020 was 41%.

Results:

Results of the survey were compared to all long term care homes owned and managed by Sienna Senior Living.

The overall 2021 Family satisfaction score was 94% compared to the 2020 Family satisfaction score of 95%, a decrease of 1%. The overall Family satisfaction score among Sienna Senior Living was 88%.

Of the 27 questions offered all scores were at or better than the Sienna average.

The next steps in the process are to review the results with Family Council. The results of those discussions will form an action plan to improve areas that stakeholders are most concerned about.

Consultations:

Sienna Senior Living

Attachment A:

2021 Victoria Manor Family Satisfaction Report

Director: Rod Sutherland

Phone: 705-324-9870 ext. 3206

E-Mail: rsutherland@kawarthalakes.ca

CARE COMMUNITY

FAMILY EXPERIENCE SURVEY

Data begins:
Data ends:
Date reported:

AUG 13, 2021 OCT 21, 2021OCT 26, 2021

COMPREHENSIVE REPORT

ANALYSIS PREPARED FOR

SIENNA SENIOR LIVING

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VICTORIA MANOR

220 Angeline Street South • Lindsay, ON K9V 5E9

This report summarizes your survey results. The charts and graphs selected by your organization provide important information necessary to identify opportunities for improvement, as well as areas in which respondents feel you do well.

Surveys created:

168

Surveys received:

83

Response rate:

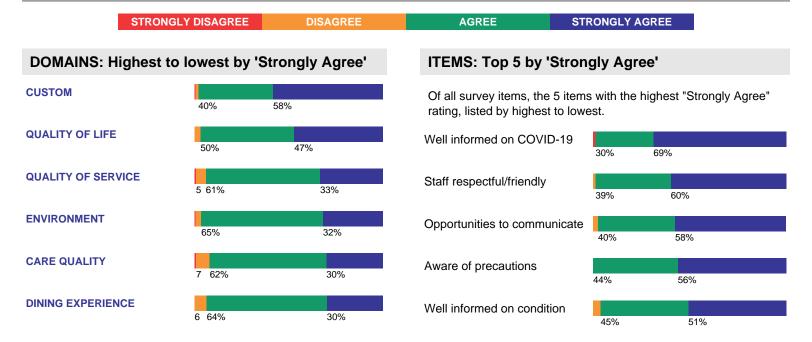
49%



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COMPREHENSIVE REPORT

SURVEY HIGHLIGHTS



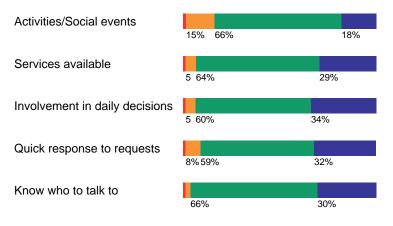
COMMENTS: Top words

ITEM: What are three words you would use to describe your experience at our care community?

friendly	25
caring	24
clean	12
professional	11
safe	7
helpful	4
informative	4
kind	4
pleasant	4
respectful	4
comfortable	3
compassionate	3
reliable	3
supportive	3
accomodating	2

ITEMS: Bottom 5 by 'Strongly Disagree'

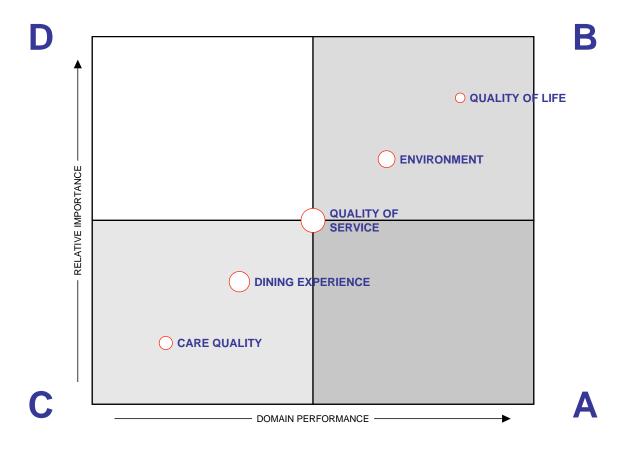
Of all survey items, the 5 items with the highest "Strongly Disagree" rating, listed by highest to lowest.



AUG 13, 2021

Data begins:

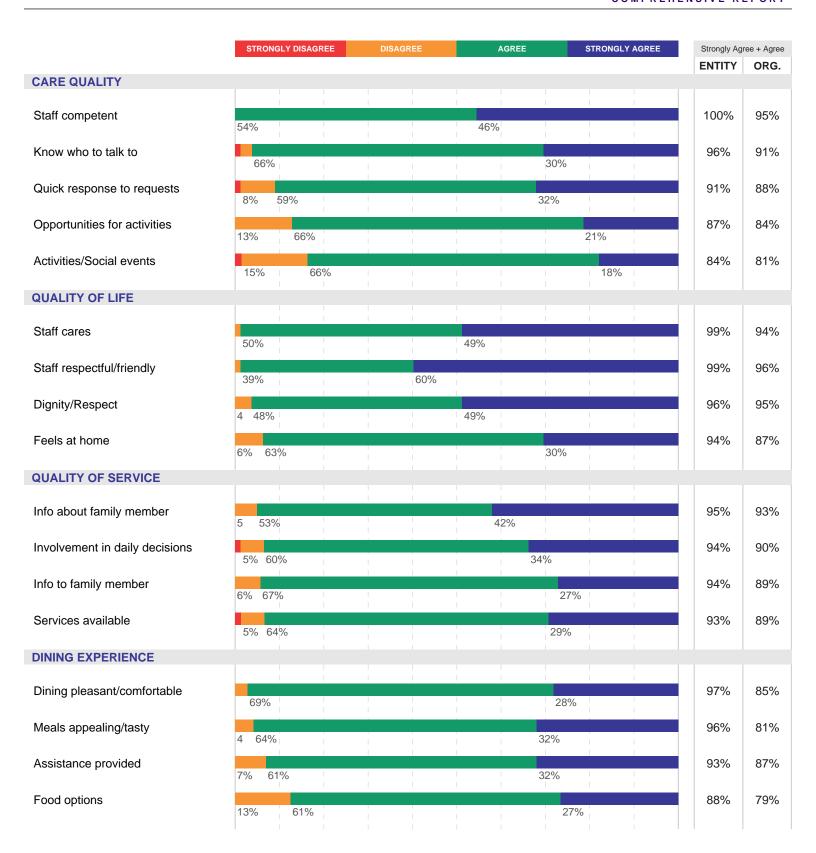
DOMAIN PRIORITY MAP





COMPREHENSIVE REPORT

RATINGS BY DOMAIN



Continued on next page

Data begins: AUG 13, 2021 Data ends: OCT 21, 2021 Date reported: OCT 26, 2021

COMPREHENSIVE REPORT

RATINGS BY DOMAIN

Continued from previous page STRONGLY AGREE STRONGLY DISAGREE **AGREE** Strongly Agree + Agree **ENTITY** ORG. **ENVIRONMENT** Clean/Maintained shared space 98% 91% 68% 30% Staff responsiveness 97% 90% 64% 33% Safe in surroundings 95% 96% 57% 39% Comfortable/Attractive space 95% 89% 5% 70% 25% **EXCELLENT** Excellent + Good POOR GOOD **ENTITY** ORG. **GLOBAL** 88% Recommendation to others 95% 4 43% 52% Overall quality of services 94% 88% 6% 41% 53% STRONGLY DISAGREE AGREE STRONGLY AGREE Strongly Agree + Agree **ENTITY** ORG. **CUSTOM** 98% Aware of precautions 100% 44% 56% Well informed on COVID-19 99% 97% 30% 69% Opportunities to communicate 98% 97%

58%

51%

Continued on next page

40%

45%

Well informed on condition

115

96%

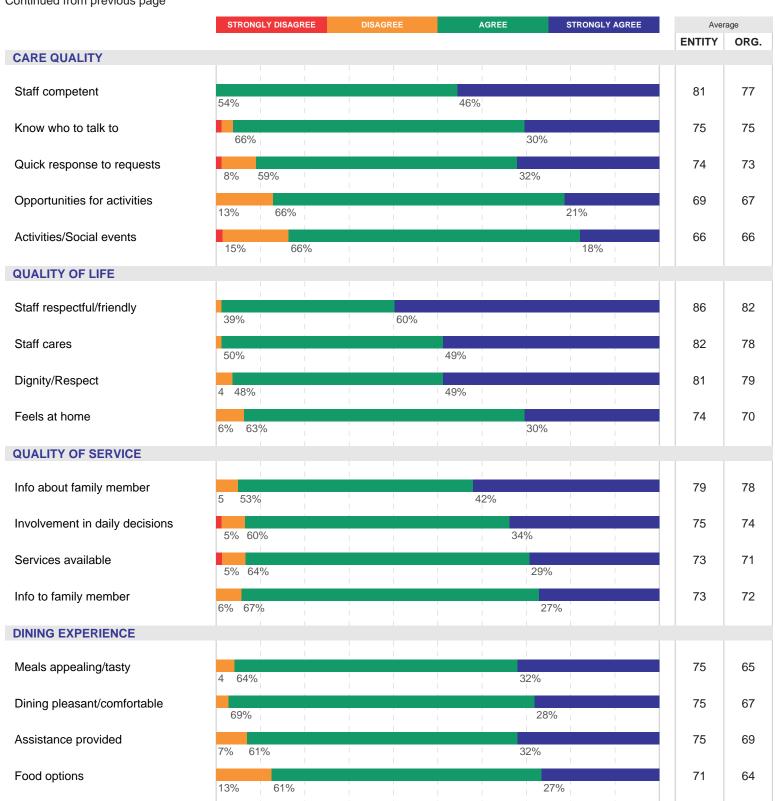
93%

Data begins: AUG 13, 2021 OCT 21, 2021 Data ends: Date reported: OCT 26, 2021

COMPREHENSIVE REPORT

RATINGS BY DOMAIN

Continued from previous page



Continued on next page

115

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Data begins: AUG 13, 2021 Data ends: OCT 21, 2021 Date reported: OCT 26, 2021

COMPREHENSIVE REPORT

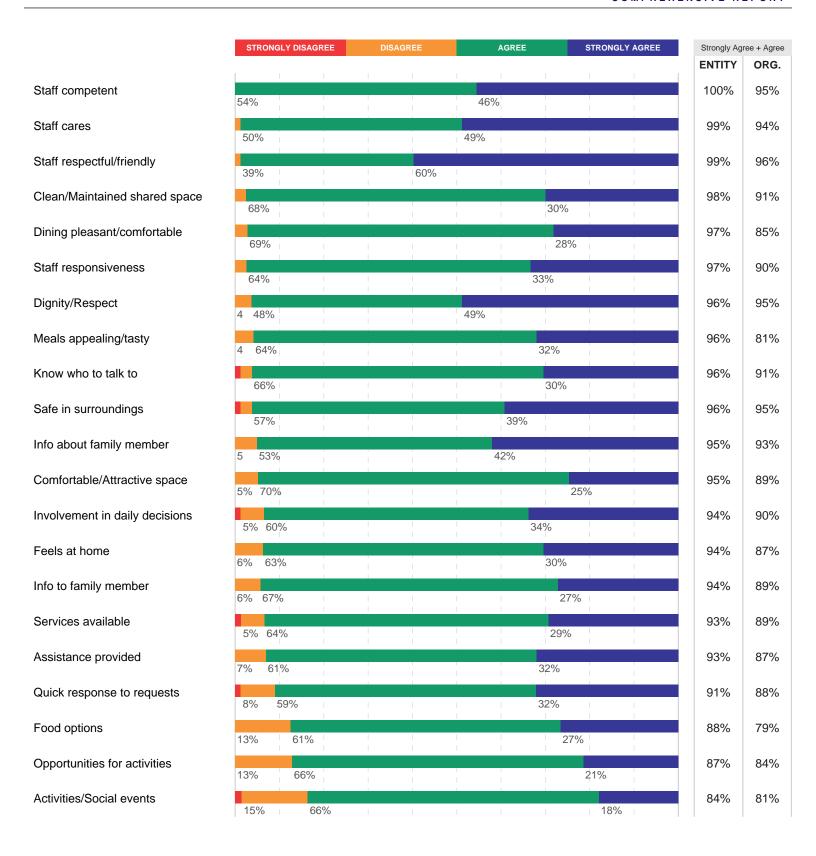
RATINGS BY DOMAIN

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COMPREHENSIVE REPORT

RATINGS BY ITEM



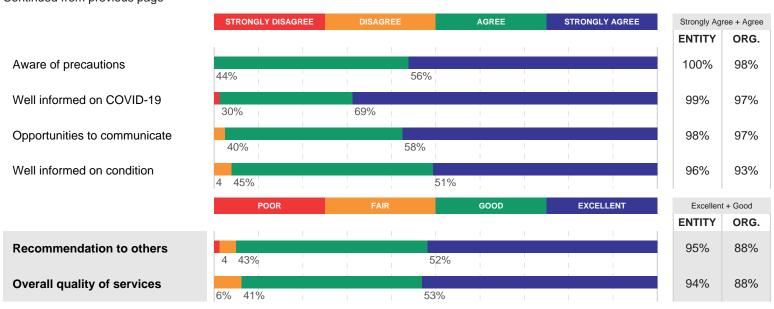
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Data begins: AUG 13, 2021 Data ends: OCT 21, 2021 Date reported: OCT 26, 2021

COMPREHENSIVE REPORT

RATINGS BY ITEM

Continued from previous page



CARE COMMUNITY FAMILY EXPERIENCE SURVEY

SURVEY ITEMS BY DOMAIN

ITEM NO.	LABEL	ITEM AS IT APPEARS ON THE SURVEY
CARE	QUALITY	
5 6 7 8 9	Staff competent Quick response to requests Know who to talk to Activities/Social events Opportunities for activities	Staff helping my family member are competent at what they do. My requests are responded to quickly. I know who to talk to if I have an issue or concern. My family member is comfortable attending activities and social events. My family member has opportunities to engage in activities throughout the day.
QUALI	TY OF LIFE	
1 2 3 4	Feels at home Staff cares Dignity/Respect Staff respectful/friendly	My family member feels at home. Staff working here really do care about me and my family. My family member is treated with dignity and respect by staff. Staff are respectful and friendly.
QUALI	TY OF SERVICE	
10 11 12 13	Services available Involvement in daily decisions Info to family member Info about family member	Services to meet my family member's personal needs are readily available. I am involved in making decisions about my family member's daily routines and healthcare Staff gives my family member the information he/she needs. Staff gives the family information needed about their family member.
DINING	G EXPERIENCE	
14 15 16 17	Meals appealing/tasty Dining pleasant/comfortable Assistance provided Food options	Meals served are appealing and tasty. The dining experience is pleasant and comfortable. Adequate assistance is provided during meals. My family member can eat what he/she wants when hungry.
ENVIR	ONMENT	
18 19 20 21	Comfortable/Attractive space Clean/Maintained shared space Staff responsiveness Safe in surroundings	The living space is attractive and comfortable for my family member. Shared spaces in this community are clean and well maintained. Staff is responsive when I report a problem or repair need. My family member is safe and secure living here.
GLOBA	AL .	
22 23	Recommendation to others Overall quality of services	Overall, how would you recommend this care community to others? How would you rate the overall quality of services provided by this care community?
ORGA	NIZATION-SPECIFIC	
24 25 26 27	Well informed on COVID-19 Well informed on condition Aware of precautions Opportunities to communicate	I am kept informed about the impact of COVID-19 within the care community. I am kept well informed about the condition of my loved one during this pandemic. I am aware of the precautions taken to protect my loved one during this pandemic. I have opportunities to communicate with my loved one during this pandemic.
COMN	1ENTS:	
CADE	OLIALITY M/hat or	ould we do to improve the quality of care for your family member?

CARE QUALITY What could we do to improve the quality of care for your family member? What could we do to improve your family member's quality of life? **QUALITY OF LIFE**

What could we do to improve our service? **QUALITY OF SERVICE** What could we to enhance our dining services? **DINING EXPERIENCE ENVIRONMENT** What could we to enhance the environment here?

GLOBAL: THREE WORDS What are three words you would use to describe your experience at our care community?

GLOBAL Any other comments?