



ANNUAL REPORT – 2013-2014

Mission Statement

Founded on a strong heritage of Jewish values and community support, the core mission of the Donald Berman Maimonides Geriatric Centre (DBM), a McGill-affiliated long-term care facility, is to care for aging members of the Quebec Jewish community who are no longer able to function independently and whose safety and well-being are entrusted to us by their families. We are recognized by the Quebec government as having a supra-regional mandate. We provide a continuum of high-quality care through our integrated network, which includes the Helen and Sam Steinberg Day Hospital, short-term respite care, community-based homes and a variety of long-term care accommodations. The Centre serves as a training ground for caregivers and professionals and conducts research in geriatric medicine and care of the elderly.

Organizational Structure

During the year 2013-2014, only one significant change occurred in our management team. Dr. Brian Gore, who has been the Director of Professional Services for almost 10 years, retired after 10 years of service as DPS. However, we are very lucky that Dr. Gore, who has been a physician at Maimonides since 1989, is remaining as a physician practising at the Centre. Dr. Gore's contribution to Maimonides and the development of research over the last fifteen years, has left a significant impact on Maimonides. We want to take this opportunity to thank Dr. Gore for everything he did for us.

At the present time, Dr. Gore's position is being temporarily filled by Dr. Gaipman, Dr. Andonatos and Dr. Bourkas until the integration with Jewish Eldercare is complete. Dr. Markus Martin, DPS at Eldercare, is also helping on some important dossiers. Heather Michelin, our Ombudsman recently submitted her resignation to the Board of Directors. A Search Committee is underway. Overall, we are very lucky to have such a stable senior management team that is allowing us to work very effectively towards our long-term plans.

Governance

The Board of Directors focused on two main objectives during the past year. The strategic planning process for the years 2013-2018 was completed and a proposition

was presented to the Agence in reference to the integration of Maimonides and Jewish Eldercare.

The strategic planning process began in May 2012 as a Maimonides-only committee. By the middle of the year, we realized that we were going to be putting forward a plan to integrate Jewish Eldercare and Maimonides. As a result, the Strategic Planning Committee was modified to include members from the Jewish Eldercare Centre Board. The Board of Directors of Maimonides approved the plan on May 13, 2013. Similarly, the Board of Directors of Jewish Eldercare approved the plan on May 9, 2013.

Strategic Plan – 2013-2018

We have adopted the following strategic orientations for the coming five years:

- 1. Integrating with Jewish Eldercare Centre in a smooth, effective and transparent way, keeping our community fully informed.**
- 2. Becoming designated as the first Planetree long-term care centre in Canada while advancing the person-centered care model in everything we do.**
- 3. Using our financial resources from government responsibly to provide the best care for our residents, and making the case for more funding when needed.**
- 4. Working with government and health care partners to ensure high quality, safe and coordinated long-term care and to strengthen teaching and research.**
- 5. Offering training programs to meet the needs in long-term care and to give our staff opportunities to learn and advance in their careers.**
- 6. Encouraging communications throughout our Centre at all levels and with key partners in other organizations.**
- 7. Obtaining grants from research funding agencies for projects led by our researchers and publishing the results in scientific journals.**
- 8. Ensuring that our physical environment continues to be welcoming, safe and supportive of the needs of residents and staff.**
- 9. Planning a new wing of DBM for our expanding teaching and research activities.**

As stated, the overarching strategic orientation for the next five years of both establishments will be the integration of Maimonides and Jewish Eldercare. Integrating the two Centres will offer significant benefits to our establishments and our community that will strengthen our mandate to provide long-term care within a Jewish setting and ensure our continued ability to care effectively for the more than one thousand clients served each year by our two Centres, community-based homes, non-institutional resources, Day Hospital and respite services. By combining our strengths, we will be

able to ensure our independence, share and build upon our expertise at every level and provide a richer ground for training and research. Our ability to attract and retain the best staff will be greatly improved and we will have a stronger financial base from which to work. Ultimately, all of this will translate into the highest quality of care for our residents.

Falling in line with our strategic direction, a proposal to integrate Maimonides and the Jewish Eldercare Centre was approved at a meeting of the Board of Directors on April 3, 2013. A proposal was developed and sent to the Agence and a transition committee was formed between the two Centres. Discussions are well underway with the Montreal Regional Board and, at this time, it is mainly a matter of getting all the paperwork completed with the hope that the integration will be approved before the end of the fiscal year 2014-2015.

Awards

At the Annual Meeting of the Centre, Corporation, Foundation and Medical Research Foundation held on November 6, 2013, RBC Dominion Securities was honoured with the Exceptional Service Award in recognition of its outstanding support to Donald Berman Maimonides over the last eight years. RBC Dominion Securities has been instrumental in making our golf tournament, which raises substantial dollars for the Centre, one of the premier tournaments in the city.

Maimonides also hands out the Spirit of Planetree Awards on an annual basis. The recipients of these Awards are nominated by staff, family and residents of Maimonides. The Caregiver Award is given to a Maimonides staff member who demonstrates a deep commitment to the Centre and serves as a role model for other employees. In 2013, the Caregiver Award winner was David Ajikobi, RN on the 4th floor. The Physician Champion Award recognizes a physician who helps promote the Planetree model of resident-centered care at Maimonides. In 2013, the Physician Champion Award was Dr. David Zukor.

Planetree Designation

During the month of June 2013, a visit took place with a delegate from Planetree International and a delegate of the Réseau Planetree Québec in order to assess our application for the Gold Designation which was made jointly between Maimonides and Jewish Eldercare. After a three-day visit, based on the submission of a one hundred page report to Planetree, we were advised in writing on September 11, 2013 that Donald Berman Maimonides Geriatric Centre and Jewish Eldercare Centre had been awarded the designation as a “Planetree Gold designated resident-centered community”. This designation recognizes our sustained excellence in the delivery of resident-centered care.

The committee determined that Maimonides and Jewish Eldercare had successfully met the rigorous criteria created by Planetree to differentiate those organizations that have

comprehensively implemented and sustained a culture of resident-centered care. As one of the only forty-five organizations world-wide awarded with this prestigious designation status to date, this achievement recognizes Donald Berman Maimonides and Jewish Eldercare as an exemplary model of resident-centered care and action. We are the first Planetree designated continuing care organization in North America as stated in the letter from Susan Frampton, Ph.D., President of Planetree. This award is a testament to the organization's staff and leadership, each of whom has played a crucial role in integrating resident-centered practices, attitudes and values into their day-to-day work and into their interactions with residents, family members and colleagues.

We celebrated our designation on Wednesday evening, October 9, 2013 at the 2013 Planetree Annual Conference which took place in Montreal, Canada. Thirty Board Members, senior managers and front-line staff members joined us for the ceremony where we accepted the award on behalf of Donald Berman Maimonides and Jewish Eldercare Centre.

We are very proud to have received this designation and look forward to continuing a resident-centered care vision at both Maimonides and Jewish Eldercare.

Ombudsman /Comité de Vigilance

The Ombudsman's office treated 32 formal complaints this year, which represents a decrease from the 50 formal complaints treated in 2012-2013.

The office also treated 42 assistances (smaller issues which did not need a formal investigation), which represents a slight increase from the 39 assistances treated in 2012-2013.

Five medical complaints were reviewed by the Medical Examiner in 2013-2014, of which three were concluded by the Medical Examiner without recommendations and two were concluded by the Medical Examiner with recommendations that were implemented by Maimonides. The Review Committee reviewed the Medical Examiner's conclusions in one case (at the request of the complainant) and concluded that the Medical Examiner acted diligently and fairly.

One complaint was appealed to the Protecteur du Citoyen and is pending their investigation. Five complaints pending from the previous year (2012-2013) were concluded by the Protecteur du Citoyen during 2013-2014.

All recommendations made by the Protecteur du Citoyen were implemented by Maimonides. The Protecteur du Citoyen's recommendations concerned issues including: housekeeping practices, lost items policy, staff communication between shifts, incontinence care, and testing procedures for fall prevention equipment.

In 2013-2014, the issues followed the same general trend as in the previous years with one new trend emerging:

- Dissatisfaction with internal transfers from one floor to the other;
- General communication issues with staff;
- Theft; and
- Residents affected by the behavior of other residents/*milieu de vie* issues of group living.

There is no measure for the complexity of complaints, however based on conversations with other similar organizations; our complaints continue to be among the most complex.

In addition to receiving, investigating and treating complaints, there have been several highlights this year:

1. Resources Intermediaires (RI): Ms. Michelin received several complaints from family members of residents at our RIs which indicate that the RI community understands the function of an Ombudsman and knows how to contact her. Ms. Michelin visited the RIs on several occasions.
2. Visibility: Visibility continues to be a priority for the Ombudsman. Ms. Michelin arranges her schedule so that she has office hours around holiday time, and visits the units as much as possible.
3. Ms. Michelin gave a presentation to nursing management on the role of the Ombudsman and met with new Head Nurses to explain the role of the Ombudsman to them in detail.
4. Ms. Michelin attended two Interdisciplinary Team Meetings, to get a better sense of what information is shared with residents and their families and to better understand this process.

Focus on the Future

In the spirit of “Joining Forces for the Best Care”, we have spent the past year working hard creating committees and having regular meetings in preparation for our integration. Challenges on how to harmonize the two sites such as integrating similar programs and policies and procedures – have been encountered by all. Staff on all levels need to be congratulated as they have risen to the occasion by being open to diverse ideas and new approaches. Together we strive to demonstrate our capabilities and build on our reputation for being a leader in providing excellent long-term care and a model for others to follow.

The annual report continues to track the progress in achieving the strategic priorities established in the Strategic Plan for 2013-2018. Only new developments for 2013-2014 will be highlighted.

Integrating with Jewish Eldercare Centre in a smooth, effective and transparent way, keeping our communities fully informed.

- Public Relations to Jewish Community – An ad appeared in the Canadian Jewish News in the Spring of 2013.
- Meetings were held with staff.

- We have initiated discussions to determine a common Nursing Model for both centres.
- Interdisciplinary task forces and committees from both sites were integrated to harmonize our clinical policies and procedures as well as to revise and develop programs such as:
 - ✓ Skin and Wound Care Program
 - ✓ Fall Prevention Program
 - ✓ Restraint Reduction Program
 - ✓ Pain Assessment and Management Program including the Opioid Surveillance
 - ✓ End of Life Care Program including the Post-Mortem Policy and Procedure
 - ✓ Dining Experience Program
 - ✓ Infection Prevention and Control Program
 - ✓ Interdisciplinary Team Meeting Process

Becoming designated as the first Planetree long-term care centre in Canada while advancing the person-centered care model in everything we do

- We continue to promote the “Milieu de Vie” philosophy to adopt a respectful, supportive and personalized approach for each resident in our daily care.
- An *Admission assessment timeline* tool was developed which lists the administrative and clinical interventions that should occur during the first six to eight weeks of a resident’s stay.
- An interdisciplinary, inter-establishment committee was created in September 2013 to harmonize the fall prevention programs at JEC and DBM. The “Scott Fall Risk Assessment Tool” was chosen and assessed for ease of use and effectiveness.
- The restraint-reduction approach to care is in the process of being integrated with the program at DBM using an interdisciplinary committee from both sites. Additionally, the law defining restraints changed two years ago impacting on our clinical guidelines. The program is presently being re-vamped to reflect these changes.
- The Rehab department integrated the role of the educator into the occupational and physical therapy programs.
- Two drama therapy graduate students initiated three new innovative programs. The 3rd floor Dance Party; the 5th floor Drama Club; and the Re-telling of Purim; a travelling interactive play performed on multiple various floors.
- The art therapist and art therapy students promoted The Travelling Canvas/Storyboard to engage residents with limited attention spans. Residents exhibited their art work for four months at La Ruche d’art, in St-Henri, QC. Open Studio was well-received on Monday evenings whilst the students were present.
- The Auxiliary produced Tribute Cards, using residents’ art work made in the context of art therapy.
- Social Service has continued to utilize the Systems’ Navigator approach, providing intensive service delivery to new admissions and their families.

- A new policy was implemented with the objective of ensuring that, in the absence of evidence of incapacity, the resident is the primary contact for any discussion relating to their care and treatment needs. During this past year, ongoing emphasis has been placed on involving the resident in the signing of authorizations for care, including advanced directives and treatment decisions.
- The new summer excursion program funded by the Auxiliary was implemented.

Using our financial resources from government responsibly to provide the best care for our residents, and making the case for more funding when needed

- This year, we have begun to harmonize on many fronts including common purchases and policies and procedures. This journey started by exploring commonalities/differences in CSR and Equipment purchases and will continue throughout the coming year.
- The LEAN approach is slowly being integrated into our organizational culture in order to provide the best care for our residents, and making the case for more funding when needed.
- The concerted efforts of the admitting office and the interdisciplinary team have been successful in maintaining an occupancy rate of 99.8%.
- There has been a decrease of twenty-five admissions to the respite program. The occupancy rate of 65% in this program remains a concern and we continue to promote this program at every opportunity. These places are much needed by the community as they provide needed respite to caregivers who are looking after persons requiring substantial care.
- The occupancy rate in our non-institutional resources (Lev-Tov and Maison Paternelle) remains stable at 99%.

Working with government and health care partners to ensure high quality, safe and coordinated long-term care and to strengthen teaching and research

- Because of changes to the way in which the Health and Social Services Agency makes allocation decisions, it has been challenging to continue our practice of preparing residents in advance. In order to explore ways to better prepare our residents, a focus group was convened that included internal and external partners. Internal partners included key staff persons and family representatives; external partners included the Montreal Health and Social Services Agency, our major hospitals and CSSS partners. This has led to improved partnerships, better collaboration and a renewed commitment to focus on the preparation and welcoming of new residents and their families.
- Following negotiation with the Agency, they have agreed that only residents who fit the mandate of the behavioural unit will be admitted directly to this unit, rather than being admitted to the first available accommodation. As part of the pre-admission assessment, the System's Navigator screens all those on the waiting list.
- DBM was instrumental in advocating with Dawson College to offer a collegial diploma in Rehab Therapy. In fall 2013, DBM was the first long-term care centre to partner with Dawson to integrate students from their newly-developed Physical Rehabilitation Program. Two groups of students were supervised by a teacher

from Dawson to do clinical education. This course enables the students to develop their clinical skills in resident care and offers additional rehab services to residents.

Offering training programs to meet the needs in long-term care and to give our staff opportunities to learn and advance in their careers

- In response to recommendations from Accreditation Canada, the Ministry and Planetree, we continued to offer workshops during the year to support staff. At DBM, the manner on how these workshops were planned and provided changed during the year as a result of a new process.
- Our nursing staff was coached and supported throughout the year by the Clinical Nurse Consultants and the Infection Prevention and Control Nurse Consultants. Their presence had a positive impact on the quality of care provided.
- We continued to support and encourage the nurses to upgrade their knowledge through the CNA Certification and to be recognized in the field of Gerontology as competent nurses.
- Once again, with the generous donation from our Foundation, we were able to provide bursaries for our staff members who are upgrading their education. For the year 2013-2014, \$25,000 was allocated by the Foundation for staff bursaries. The Foundation's commitment to this program reflects the value that our community places on the staff at Maimonides.
- As usual, the number of students during the year was maintained and has now reached approximately seven hundred students. We have maintained our partnerships and affiliations with McGill, Université de Montréal, many CEGEPS and adult-learning programs. Our McGill-affiliation learning contract dates back at least forty years and continues to grow stronger.
- We have continued our partnership with Pearson Adult Education Centre to continue the Signature training program for PABs and LPNs. By providing training on-site for these PABs and LPNs, Maimonides continues to ensure a supply of top-notch staff members who are focused on the elderly.

Encouraging communications throughout our Centre at all levels and with key partners in other organizations

- Maimonides continues to be extremely visible, provincially/nationally and world-wide. We continue to have frequent visits from other organizations and to set the standard in many of these organizations.
- We were invited during the year 2013-2014 to present a brief to the Parliamentary Commission on living conditions for adults in long-term care. We were one of the few organizations chosen and deposited both a written brief and made a presentation in front of the Commission in the month of February 2014. As we noted during this presentation, we have many partners ranging from the Jewish General Hospital to the CSSS Cavendish and adult education programs.
- Jewish Eldercare is currently working on an initiative with the Jewish General in reference to accommodating long-term care, stable, psychiatric patients from the Jewish.

Obtaining grants from research funding agencies for projects led by our researchers and publishing the results in scientific journals

- The Donald Berman Maimonides Centre for Research in Aging has continued to fulfil its strategic goals for the 2013-2014 fiscal year. Significant steps have been taken to further establish the Centre for Research in Aging as a leader in long-term care geriatric research and our achievements continue to position Maimonides as a centre of excellence in long-term care.
- Scientific Productivity and Collaboration - Productivity at the CRA remains high, and this year our researchers presented at several conferences and colloquiums to disseminate findings at the local, national, and international level. These include: the 7th Canadian Conference on Dementia (Vancouver, Canada), the 42nd Annual Scientific and Educational Meeting of the Canadian Association on Gerontology (Halifax, Canada), the Canadian Academy of Psychiatric Epidemiology Scientific Symposium (Ottawa, Canada), the Réseau Québécois de Recherche sur le Vieillessement (RQRV) Annual Scientific Meeting (Québec, Canada), the McGill University Health Centre (MUHC) Research Institute Division of Geriatrics Research Day (Montreal, Canada), and the Association of Jewish Aging Services (AJAS) Annual Conference (Jacksonville, Florida).
- In addition to scientific presentations, six new publications featured members of our Centre as authors as well as researchers who have acted as collaborators with our institution in the production of research.
- Finally, we have continued to provide a platform for knowledge transfer through our quarterly research seminars series.
- External Funding
 - Our Director and Senior Researcher participated as co-applicants in a prestigious national initiative entitled the Canadian Consortium on Neurodegeneration on Aging (CCNA). It is described as “the premier research hub for all aspects of research involving neurodegenerative diseases that affect cognition in aging – including Alzheimer’s disease. The CCNA is supported by CIHR and many partners and is the Canadian component of CIHR’s International Collaborative Research Strategy for Alzheimer’s Disease.
 - This year, a number of grant applications were developed and submitted to the Canadian Institutes of Health Research (CIHR), the Canadian Alzheimer’s Society and to the Long-Term Care Axis of the RQRV, a Fonds québécois de recherché en santé (FRSQ) funded network. Several other grants are planned for competitions in the Fall and Winter.
 - Last year, the CRA was awarded project funding by the RQRV for a study evaluating the prevalence, incidence, and factors associated with behavioral and psychological symptoms of dementia (BPSD). Expectations of productivity based on the funded protocol were met: the study was conducted, data collection was completed, preliminary results were presented at national conferences and complete data analysis is expected to begin in the coming months.

- Future Directions – The main strategic and long-term objectives for the Centre include increasing our recognition as a leader in geriatric long-term care research and continuing to obtain extramural funding for our research. To this end, manuscripts for several projects currently undergoing data analysis will be sent to high-impact journals for publication in the coming months. Our team will continue to apply for funding at major (provincial and national) agencies.

Ensuring that our physical environment continues to be welcoming, safe and supportive of the needs of residents and staff

- With the continued input of our extremely active Building and Maintenance Committee, the Chief of Technical Services and the Nursing and Clinical Services Departments, all funds received from the Donald Berman Maimonides Geriatric Centre Foundation and the Quebec government during the past year were directed towards improving the quality of life for residents at Maimonides.

- Projects completed during the year include the following:
Mackle Handicap Entrance

The work on the Mackle entrance has been completed. This project involved a new wheelchair ramp to the building as well as new stairs to the parking lot area along with two designated handicap parking spots. This project included new landscaping to the area at the Mackle entrance.

Ceiling Lifts

A few of the older ceiling lifts on the 2nd and 5th floors were replaced with newer Maxi Sky two ceiling lifts with funds given to us by the Agence.

- Ongoing Projects:
Kitchen Floor

Work on the new kitchen floor at Maimonides was completed before Passover despite the numerous delays in the project. The project allowed us to also redo the floor in the cafeteria which was replaced with a STONEHARD floor that doesn't require maintenance like waxing and buffing.

Heating Project

The first phase of the heating project started with work being done on floors 2-5 to accommodate the wiring of the baseboard heaters. The project is expected to be completed by September.

Konigsberg Garden and Caldwell Entrance

This redesign is underway. We expect the project to be completed by the end of June.

Resident Phone System

The equipment for the resident's phone system has been installed. We have been transferring residents over to the in-house system from Bell but have noticed that

there are many residents who have many other services that were unknown to the department. This has caused some issues in the transition but we are working to accommodate as many residents as possible.

- Future Projects
Joints

The study is still being done on the repair of the exterior joints on the precast panels and the windows.

Mackle Parking Lot

The Mackle parking lot will be redesigned to include one main entrance along with new lighting and a new configuration to add more parking spots.

6th Floor Sitting Area

Similar to the 2nd floor sitting area, the 6th floor north side area will be renovated to include a new meeting room for nursing along with a newly-designed area for residents.

Planning a new wing of DBM for our expanding teaching and research activities

- The very generous donation over the past few years from the Donald Berman Foundation stimulated our “wish list” thinking and resulted in the development and submission of a PDI (Plan directeur Immobilier) for an additional building at Maimonides. This has been submitted to the government but is stalled at this time. We hope, once our integration discussions with Jewish Eldercare move forward, that we will be able to look at this dossier in depth at the Agence.

Indicators and the Objectives of the Establishment

	<u>2012/2013</u>	<u>2013/2014</u>
Number of Incident/Accident Reports	2,384	2,393
Number of Residents absent without authorization (Code yellows)	32	18
No injury. Nine of these occurred to residents who did not have a security bracelet at the time. Eight of these were residents who actually left the building of the ten events where the resident was in the building, three occurred to the same resident who we know is a wanderer. He was found on other floors despite having a bracelet that was working.		

	<u>2012/2013</u>	<u>2013/2014</u>
Number of Aggressions	46	62
Number of Falls	253	226
Number of Resident Infections		
• Cdiff	21	16
• MRSA	46	28
• VRE	18	20
Number of Residents with Restraints – at period 13	7	7
Number of Residents with Pressure Sores – at period 13		
• Minor (stage 1-2)	17	36
• Major (stage 3-4)	11	12
Number of Work Accidents - total	143	103
• Without loss of work time	123	89
• With loss of work time	20	14
Ratio between the number of hours in Salary Insurance and the number of worked hours	3.5%	4.5%
Turnover rate of position holders	5.7%	4.7%
Ratio of overtime hours worked by the nurses	0.85%	1.1%
Use of nursing agencies by the nurses	0%	0%
Maintain administrative expenses	4.8%	4.6%
- with Jewish Eldercare Centre	5.57%	5.23%

Financial

We had an extremely challenging year during which we absorbed cuts in our administrative areas of \$565,000. This cut of \$565,000 was on top of a cut of \$428,000 the year before. In addition, in the year 2014-2015, a minimum additional cut of \$1,183,000 has been identified as another potential cut. This now brings our total cuts over the past four years to \$2,390,000 (including an additional cut of \$214,000). While we have been successful in reducing our administrative expenses substantially, we have reached the limit at this time.

Even with the additional cuts this year, we ended the year with a balanced budget. As we go forward into the next fiscal year, we are hopeful that our ability to look at

innovative solutions and partnerships will help us move forward during these difficult times.

Conclusion

Donald Berman Maimonides Geriatric Centre is extremely proud of what it has accomplished in the past years. The Boards of Directors, our Foundation and Auxiliary members and front-line staff at Maimonides have all contributed to help us to achieve the goal of outstanding resident care. With the combined support of our community and the Agence, we are confident that the milieu de vie and quality of care will continue to improve and that the objectives which were identified in our Strategic Plan for the next few years will be implemented in a timely fashion.

May 22, 2014