



## **ANNUAL REPORT – 2010-2011**

### **Mission Statement**

The core mission of Maimonides Geriatric Centre, a McGill University-affiliated long-term care facility, is to provide service to aging members of the community who are no longer able to function independently. They are entrusted to our care by their families, with whom we are allied in values and purpose. Our mandate is founded on a strong heritage of Jewish values and community support. 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. In line with our mission, the Centre serves as a training ground for professionals and conducts research into issues related to geriatric medicine and care of the elderly.

### **Organizational Structure**

During the year 2010-2011, Dr. Mabelle Wilchesky joined our senior management team as the Director of Research at our newly-established Centre for Research in Aging. Dr. Wilchesky holds a PhD in Epidemiology and Biostatistics from McGill University, completed her PhD coursework in health management at Ben Gurion University of the Negev and as well holds a Masters in Health Economics from Queens University. The entire team is very pleased to now have a full-time Director of Research who will help us position Maimonides as a Centre of Expertise in Long-Term Care to study the impacts of “More than Care” on the well-being of our residents and staff and to actively engage in the knowledge transfer for improved practice and policies.

We are also fortunate that our team has remained stable for the past number of years. We continue to be challenged by all kinds of new projects and demands that are imposed on us by our various partners and by the direction we have set for ourselves in conjunction with the Board of Directors.

## **Governance**

During the Fall of 2010, a new Bill was deposited in relation to the health care law in the Province of Quebec. Bill 127 is currently under study by the National Assembly and it is expected that some modifications to the original Bill will be proposed and it will be adopted in June of 2011 for implementation in the Fall and Winter of 2011-2012. There are some changes to the Board of Directors, notably in reducing the size of the Board and some of the responsibilities between the Board of Directors and the Agence. One of our major concerns is the elimination of the Corporation representative seat. We will have to ensure that our other community representatives continue to have strong representation on the Board of Directors in the future.

## **Outstanding Service Awards**

At the Annual Meeting of the Centre, Corporation, Foundation and Medical Research Foundation held on November 3, 2010, Leonard Lewkowict, Past President of the Centre was honoured with the Exceptional Service Award. Len was recognized for his role in shaping Maimonides' future through his strategic planning expertise, his untiring commitment and his ability to think big and inspire others to move forward with him.

Maimonides Geriatric Centre was also presented with the Laura Gilpin Spirit of Kindness Award at the 2010 Planetree Annual Conference. This award, given at a special ceremony attended by Planetree members from across the globe, acknowledged Maimonides for its extraordinary work in caring for its caregivers. Planetree is the internationally-recognized not-for-profit organization that partners with health care providers worldwide to advance patient-centered approaches to care. Maimonides is the first long-term care Planetree affiliate in Canada. We were chosen as the recipient of this award because of Planetree Year, a year in which we celebrated our centennial by offering a wide variety of activities for staff. This award is a testament to our commitment to our staff since caring for the caregivers not only benefits the staff at Maimonides but also positions them well to provide the best possible care to our residents.

Maimonides was also a Planetree Film Festival Award winner for the second year in a row. This year's submission featured a footage of members of the Maimonides community accompanied by a song written and performed by two of Maimonides own staff and aspiring musicians, Lance Daniel and Aleem Mohammed.

Amy Fish, our Ombudsman, was the recipient from Federation CJA in November 2010 of the Hineni Award for leadership and commitment to the Jewish community. We are very proud that Amy's commitment extends beyond her role as Ombudsman at Maimonides.

Finally, Fruan Tabamo, Head Nurse on the 2<sup>nd</sup> floor, was awarded the Best in Research Award for his poster: The Validity and Reliability of Inlow's 60-second Diabetic Foot Screen Screening Tool at the Canadian Association of Wound Care Conference which took place in November of 2010.

## **100<sup>th</sup> Anniversary Celebrations**

The year 2010-2011 was a landmark year at Maimonides. We celebrated 100 years of care to the community in a number of different ways. We began the year with a large Gala that took place at the Shaar Hashamayim Synagogue, honouring all our Past Presidents of the Corporation, the Centre, the Foundation and the Auxiliary. Our annual family and staff barbeque that took place in the Summer attracted hundreds of guests from the community and we offered a geriatric mini-med series to the public in the Fall. These lectures featured experts on geriatric care and aging speaking on topics that affect us all.

The first lecture featured Dr. Bill Reichmann talking about Brain Fitness. Maimonides Research Fellow, Dr. Krystyna Kouri offered practical tips and coping strategies for people whose loved ones suffer from dementia. In the third lecture, world-renowned medical ethicist, Rabbi Dr. Moshe Tendler discussed the Jewish perspective on End-of-Life Decision-Making and in the final lecture of the series, Dr. Ruby Friedman gave a dynamic talk on Healthy Aging.

In addition, Maimonides hosted a symposium for the members of the Association of Jewish Aging Services of North America. David Levine, President and Executive Director of the Agence de la santé et de services sociaux de Montréal gave American attendees a briefing on universal healthcare and the particularities of the Quebec healthcare system. Dr. Hartley Stern, Executive Director of the Jewish General Hospital spoke about philanthropy and the important relationship between CEOs and their Foundations. Maimonides Rabbi Shalom Chriqui spoke about the importance of respecting both Sephardic and Ashkenazi cultures in long-term care and Linda August, the Assistant Director of Nursing and Clinical Services at Maimonides spoke about public/private partnerships in long-term care. Many exciting activities for staff took place during the course of 2010 highlighting our 100<sup>th</sup> Anniversary and recognizing the Planetree philosophy which has been adopted at Maimonides.

## **Ombudsman /Comité de Vigilance**

The Ombudsman's office received and treated 27 formal complaints this year. The office also treated 16 assistances (smaller issues that required some help but did not need a formal investigation). Two complaints were turned over to the Medical Examiner for review.

In addition to receiving, investigating and treating complaints, three major projects have been accomplished this year.

1. Delivering Bad News: The Ombudsman conducted a series of in-service education sessions to managers and staff about how to deliver bad news gently and effectively. This workshop has been well received and will continue through 2011-12.
2. Ethics: Part of the role of the Ombudsman is to disseminate ethical principles throughout the Centre. This year, Amy worked with our administration on a booklet regarding the use of Ethical Principles in decision making. She has also been invited to assist clinical teams with preparing for presentation to the Clinical Ethics Committee.
3. Visibility: Visibility continues to be a priority for the Ombudsman. Amy continues to have extra office hours around the holiday time, and to spend time on the units visiting with families.

This represents a slight decrease in complaints over last year, and a slight increase in assistances. It is also worth noting that the increase in outreach to our Accredited Homes was successful. For the first time, we received 2 complaints and an assistance from the Accredited Homes.

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.

## **Strategic Plan – 2007-2012**

### **More than Care**

In keeping with the Strategic Plan and creating a new vision at Maimonides of "More than Care", Maimonides is working towards becoming the first long-term care centre in Canada to be designated a Planetree organization at the forefront of client-centered care.

Listed below are the ten continuing care components of Planetree that are now at the core of everything we do at Maimonides.

1. Recognizing the primary importance of human interactions.
2. Enhancing each other's life journey.
3. Supporting independence, dignity and choice.
4. Incorporating family, friends and social support networks.
5. Supporting spirituality as a source of inner strength.
6. Promoting paths to well-being.
7. Empowering individuals through information and education.
8. Recognizing the nutritional and nurturing aspects of food.
9. Offering meaningful arts, activities and entertainment.
10. Providing an environment conducive to quality living.

The remainder of this report will track our accomplishments over the past year according to the themes laid out in the Strategic Plan. We will focus on any new developments and highlight areas that have evolved since last year's Annual Report.

### **Care to Residents**

- To adopt a respectful, supportive and personalized approach to care for each resident.
- To continue developing new approaches to creating a safe homelike environment tailored to the individual needs.
- To provide much-needed respite services to persons who are not yet residents of the Centre.

### Planetree Approach

In keeping with the Strategic Plan and creating a new vision at Maimonides of "More than Care", the management of Maimonides is continuing to implement the Planetree approach. This involves the creation of a centre-wide culture in which residents get nurturing, compassionate, personalized care. By the end of March 2011, all our staff have attended the first Planetree retreat. In addition, more than 80 staff will have attended the second Planetree retreat. Mini retreats have also been designed for companions, volunteers and families to explain to them what Planetree is all about. Sessions started last Fall and have been well-received.

Four working groups; the dining experience, communication, the admissions process and end-of-life care continue to work towards the targeted goals outlined in these areas.

## Risk Management and Disclosure

The Risk Management Committee, which includes a Board Member at Maimonides, met on a regular basis during 2010-2011. As noted in the past, falls make up more than half of all reported incidents and accidents over the year and remain a high priority at Maimonides. As compared to last year, the total number of falls has increased by approximately 16%. Fortunately, the majority of them (58%) lead to no injury and only 3 (less than 1%) of these lead to severe injuries, such as hip fractures. This is a reduction of 40% as compared to last year.

Nearly 25% of the incident/accident reports filled out this past year were of the other category which includes mostly injury of unknown origin but also events such as AWOL or missing resident, errors related to charting, pressure sores, restraints, self-injury, etc. Most of these other incidents were of a minor severity. However, 2 of these led to a severe injury in the form of a hip fracture and a laceration that got infected requiring the resident to be hospitalized for 2 days. Finally, we note that, despite the fact that the level of disclosure is increasing, disclosure continues to be a challenge. This past year we had an 84% compliance with the law and our policy and procedure. This statistic is very similar to the one we tracked last year. A complete list of all the risk management indicators can be found in the section on page 13 in this report.

## Infection Control Program

The year 2010-2011 was relatively uneventful in the infection control area. A few outbreaks of Norovirus (gastroenteritis) took place in some of the various facilities. The infection control team intervened very quickly at both Lev Tov and Maimonides in order to bring the situation under control quickly. The flu campaign season also started in November and 36% of our staff were vaccinated while 95% of the residents received vaccines.

## New Programs

### Better Hearing Program

The Better Hearing Program, developed over the last several years by Nechama Surik, has been refined and written up as a reference guide. This guide was easy to follow practice guidelines for staff working with hearing-impaired residents and will be used as a model for all centres working with people with hearing loss. The program has been adopted by the Ordre des Audioprothésistes du Québec and will be used throughout the Province of Quebec.

### Therapeutic Services

This year we were able to purchase additional Closed-air Chamber surfaces in order to complete the project from the previous year. These mattresses are financed by the Foundation and range in price from \$5,000 to \$10,000.

### Fitness Centre

We have been able to open the rehab gym every Friday morning with the assistance of a devoted volunteer to offer residents to continue to come and use the equipment on their own at times when it is not being used by the Rehab professionals. In early August, we were also able to open the Fitness Centre on Sunday mornings.

### Physiotherapy Program

Given the development of unit-based walking programs and the importance of maintaining the resident's ability to weight bear and ambulate, the Physiotherapy services were re-organized in January 2011 in order to meet this objective. This change will also be of benefit for the Fall Prevention program, particularly for residents that are at risk of falling. The walking program which has been developed to increase and maintain mobility of residents in their daily activities was implemented on all units with the inclusion of nursing staff in this project. Each unit was given a list of residents who should be walked daily and indicators are being collected to determine its effectiveness. The goal is to have the residents who are part of the program walk with assistance at least once daily 80% of the time.

### Planetree Spa Room

The Planetree Spa Room, financed by the Foundation, was created last year to be used for staff and residents to relax and bring down their level of stress. One of the room's unique features is an illuminated sky ceiling. This back-lit virtual sky light creates an incredible lifelike image allowing residents to feel like they are lying outside looking up at the sky. The room is also equipped with state-of-the-art vibro acoustic massage chairs, a tranquility fountain as well as aromatherapy and essential oils. This new spa room provides a venue for both staff and residents to escape their daily routines and rejuvenate the body and soul.

### **Partnerships with Families**

- To integrate families into the overall functioning of the Centre.

- To respect the multiplicity of the families' needs for information and support.
- To support the families of elderly persons in the community who may not yet be the residents of long-term facilities.

One of the major concerns often expressed by families is the difficulty they face and experience in going through the loss of a loved one. In order to address this concern, we have offered 4 end-of-life care presentations throughout the year dedicated specifically for families.

## **Research**

- To position Maimonides Geriatric Centre as a centre of expertise in long-term care.
- To study the impacts of a "MORE THAN CARE" approach on the well-being of residents and staff.
- To actively engage in knowledge transfer for improved practice and policies.

In order to meet these objectives, the research activities for the year ending March 31, 2011 have focused primarily on the following 3 key items of business:

1. Re-organization of activities under the new leadership of the full-time Director of Research.
2. Activities aimed at enhancing the profile of research at Maimonides.
3. The numerous projects and presentations being conducted either in-house or in collaboration with the research team.

The Research Department has also been involved in reinforcing our links with McGill University as an affiliate centre by establishing the McGill Internal Review Board as our standard for ethical review of all research studies.

In order to enhance the profile of research at Maimonides, we have established a calendar of research seminars which highlight several of the research projects which are currently ongoing. It is our hope that we will be able to schedule at least 4 presentations annually. Links have also been established with Ste. Anne's Hospital Veteran Affairs Canada and L'Institut universitaire de gériatrie de Montréal. Work is also continuing with the Solidage Long-Term Care Network by means of a multi-centre study currently in the proposal phase. After taking a look at all of our current and in-development research projects which total 36 at the present time, 4 general areas of research themes emerge:

1. Quality of Care in long-term care (eg. Wound care, Diabetic Foot Screening Defining and refining Indices of Quality of care, Identifying residents at risk for BPSD, Effects of interventions on Risk Management outcomes).
2. Quality of Life in Geriatrics (eg. Alzheimer's: Caregiver communication strategies, Understanding the meaning of vocalizations in the elderly with Dementia, Cardiovascular health and Exercise in the elderly, Hearing impairment and dementia, Taste disorders in long-term care, Effects of programs on residents with dementia).
3. Planetree and "More Than Care" (eg. 2 studies measuring the impact of Planetree on family satisfaction, The Stress Evaluation Questionnaire, Research investigating educational programs aimed at enhancing staff communication skills with residents, and "Relation-Centered Care").
4. Effects of Drugs in the Elderly (eg. Antipsychotic medication use, Poly-Pharmacy, Anticholinesterase Inhibitor use, Appropriate prescribing for urinary tract infections).

During the course of the year, there were approximately 25 presentations in Quebec, Canada and the US by members of our medical, nursing and research teams. Our fellow for this year, Dr. Krystyna Kouri has continued her fellowship and she has been joined by a second fellow, Dr. Anne Bourbonnais who is currently conducting research on the vocalization of Alzheimer residents. Finally, a proposal for a novel psychogeriatric program, in conjunction with the CSSS Cavendish and Jewish Eldercare Centre, was turned down by the Agence. They required that the part-time physician for the psychiatrist needed for the program be funded and provided by one of the university-teaching hospitals. As the university-teaching hospitals have their own limited medical staffing issues and a freeze exists on new positions in psychiatry, this rendered the proposed program inoperable in its current format.

## **Teaching**

- To educate families and the community about health issues facing the elderly.
- To support staff in integrating "More than Care" principles into care practices.
- To share our expertise with other health care professionals.

This was the second year of our signature program to train PABs, a collaboration between the Pearson Adult Career Centre (PACC) and Maimonides. In June 2010, we graduated the first cohort of this program and we were fortunate to recruit 9 of the 16 graduates to work as PABs at

Maimonides. The second year of the program has proven to be just as successful. In January 2011, we began another signature training program, this time for LPNs with the Pearson Adult Career Centre. We have great hope that this program will provide a pool of LPNs qualified to work with our clientele. We are very proud that 6 of the 18 students in this program are staff from Maimonides. Future partnerships on the horizons are with CEGEPs to create a nursing program and a physical rehab therapy technician's program to be based at Maimonides.

These are extremely important developments for Maimonides Geriatric Centre. One of our biggest challenges over the past several years has been the recruitment of staff in many different areas. If we can continue to grow in this area and partner with some of the educational institutions doing the training programs of professionals in health care, we and ultimately the residents, will be the winners in the long run.

### **Public Relations and Communications**

- To strengthen our leadership position in the wider community through clear, coordinated and consistent messages about our mission, philosophy, services and activities.

Maimonides continues to be extremely visible, provincially, nationally and world-wide. Many of our professionals regularly speak around the country about the various programs at Maimonides. We are frequently receiving telephone calls from around the world asking for copies of some of our signature programs such as our restraint-free approach and our implementation of Planetree in long-term care. As noted in an earlier section, several awards were won and many members of our staff continue to sit on various boards of directors across North America.

### **Environment**

- To create supportive, secure and homelike environments for our residents that reflect "More than Care" principles.
- To project a welcoming image to families and the community at large.
- To provide supportive environments for staff involved in care, teaching and research.

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 Maimonides Geriatric Centre Foundation and the Quebec government during the past year were

directed towards improving the quality of life for the residents at Maimonides Geriatric Centre.

### Library Renovation

With a gracious donation from the Foundation, the Fern Glass Health Information Centre was renovated to include the installation of new French doors at the entrance to make it more accessible to our residents with wheelchairs and to be more attractive to the family members and staff. A comfortable lounge seating area was re-located to the front and a spacious working table was placed in the centre of the room to enable people to sit and work. Two public computer stations with internet access were also made available for research, for families and staff and a wireless connection was added for those who prefer to bring their own lap tops. The shelving units were revamped and styled in a more luxurious manner. We took this opportunity to weed out from our collections those books and journals that were too outdated and no longer of any use. The Health Information Centre is now accessible 24 hours a day.

### Synagogue Washrooms

The 2 washrooms outside the Synagogue were completely demolished and renovated during the course of the year. These washrooms have been designed in such a way that it is very easy for people to enter them since no doors are involved and are wheelchair accessible to most of our clients.

### Upcoming Projects

The heating system, ventilation for Pavilion 1A, the repair of the joints for the exterior envelope, the Konigsberg Room and exterior garden, completion of the 2<sup>nd</sup> and 3<sup>rd</sup> floor dining/activity rooms, white noise on the 3<sup>rd</sup> floor, the Gross Family Chapel and the history showcases are all ongoing projects. The technical services team is always trying to find ways to improve on what has been accomplished. They are continuing to provide the residents of Maimonides with the cleanest, safest environment possible.

### **Government and Network Relationships**

- To promote collaborative relationships with our health care system partners and government that will benefit the elderly in a variety of residential health care settings.
- To play a leadership role in the development of government policy in long-term care.

## Admissions

Maimonides continues to work in collaboration with the Agence to facilitate access to our resources. During the course of the year, there were several situations where acute care facilities were overloaded and Maimonides has responded to the directives of the Agence and has adjusted our admissions processes accordingly.

Over the course of the past year, it has been a challenge to continue our practice of preparing residents for admission by providing an approximate target date. This is because the Agence has tightly coordinated waiting lists to manage the overflow in hospitals and that the evaluation orientation program (68) has often had priority over clients waiting in the community. Fortunately, this has not created a major increase in the average wait time for admission this year. This was the first full year of operating the evaluation orientation unit (68) and we were asked to increase the number to 8 beds. They are all located on the 6<sup>th</sup> floor and spread out between the wings. We have been lucky enough to have excellent collaboration with the CSSS Cavendish who coordinates the program for Maimonides. This program had 56 admissions during 2010-2011 requiring a huge effort on the part of the 6<sup>th</sup> floor staff to manage the turnover. We have been monitoring the discharge of the residents of this program and are pleased that many of these residents transfer directly from this program to a permanent place at Maimonides. Where necessary, we advocate with the CSSS and with our partners at acute care facilities to ensure a Jewish milieu for Jewish clientele. This has been extremely successful this year. We are confident that we are offering a positive environment to this clientele and a more health-promoting setting than an acute care floor in a hospital.

## **Resources and Support Services**

- To ensure the human and financial resources are in place to implement the "More than Care" model.
- To put in place the most effective and appropriate tools to support strategic initiatives.

For the ninth year in a row, with the generous contribution of our Foundation, we have been able to offer scholarships to many of our staff who are in the process of upgrading their education. Our single biggest concern remains the recruitment of RNs. Whereas Maimonides had about 100 nurses five years ago, we now have 50. The hours of care and admissions have gone up and the acuity of that care is also increasing. In order to provide quality care based on this new reality, the Nursing

Department has almost finalized a re-organization of work that effectively uses the professional expertise of staff members while continuing to meet the standards of care. Over the course of the next year or two, we will see the implementation of many new practices.

**Risk Management Indicators**

	<u>2010/2011</u>	<u>2009/2010</u>
Response/Satisfaction Rate (actual hours of care ÷ required hours of care) Target 100%	81%	81%
Turnover Rate (admissions ÷ # residents)	37%	31.8%
Proportion of Clients with Restraints (# restraints ÷ # residents) Target 0%	2.07%	2.07%
Transfer to Acute Care (average # residents per period transferred ÷ # total residents) Target 1-2%	2.0%	1.7%
Proportion of Overtime Hours (overtime hours ÷ regular worked hrs.) Target 0%	1.94%	1.51%
Salary Insurance Rate (salary insurance hrs ÷ paid hrs.) Target 0%	2.18%	2.25%
CSST Ratio (CSST hrs ÷ paid hrs.) Target 0%	0.84%	0.55%
Residents with Falls (# falls ÷ total # patient days)	0.676%	0.584%
Residents with Falls with severe consequences (# falls with severe consequences ÷ total # patient days)	0.002%	0.004%

	<u>2010/2011</u>	<u>2009/2010</u>
Medication Errors (# medication errors ÷ patient days)	0.168%	0.141%
Aggressions (aggressions – resident to resident ÷ patient days)	0.039%	0.024%
Aggressions (aggressions- resident to staff ÷ patient days)	0.041%	0.021%
Residents absent without authorization (Code yellows) (# Residents absent without authorization/ Code yellow ÷ patient days)	0.007%	0.004%
Residents with Pressure sores (Stage III & IV) (# residents with pressure sores ÷ total # residents) Target 0%	1.99%	1.6%
Incidence of Nosocomial Infections (# new cases of Nosocomial infections ÷ patient days)	0.010%	.014%
Occupancy Rate Long-term care Target 99.4%	99.7%	99.8%
Program 68	97.2%	83.6%
# Admissions Long-term care	139	121
Program 68	56	23
Respite	64	91
# Intermediate Resources Admissions	65	24
# Accredited Homes Admissions	8	14

## **Conclusion**

We have ended 2010-2011 with a small surplus of \$362. Our ability to balance the budget during these difficult times is still due to increased income from the sale of our management services to Jewish Eldercare and our ability to stretch our administrative resources to the limit. The support that we get from our community, in particular through our Foundation and Auxiliary also helps the bottom line. Many special projects are funded through the Foundation and as a result we can direct our resources into areas that cannot be funded by the Foundation. As we celebrated our 100<sup>th</sup> Anniversary in 2010, very strong links back to our community were acknowledged and the contributions of so many different members were recognized. As seen in many Jewish nursing homes across North America, it is our community over the past 100 years that has really made the difference and has allowed us to become leaders in geriatric care in Quebec and Canada.

May 26, 2011