

McKenzie Towne Continuing Care Centre (MTCC)

Update January 22, 2014

Background:

This review is a result of a concern brought forward as a result of PPIC report.

The structure of the review will reflect past AHS reviews in continuing care owned and contracted environments. The action plan will have the following structure:

- Identified actions
- Expected targets
- Anticipated outcomes
- Accountabilities

Action Items

Completed



In Progress



Delayed



Upon initial discussions the following themes were identified:

1. Requirement for oversight related to quality of care and resident safety at Revera McKenzie Towne Continuing Care (MTCC) facility.
2. Requirement of current audit for standards and compliance at MTCC.
3. Agreement of response to Protection for Persons in Care (PPC) letter by December 31, 2013.
4. Confirmation of status and follow up of patient complaint logs for all Revera continuing care facilities in Alberta.

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1	Coordination of Action Plan						
	Action Item	Target Date	Required Outcome	Responsible Party	Progress to date	Date Completed	Actual Outcome
1.1	Draft the action plan.	Dec 4, 2013	Approved plan to track actions of Quality Assurance Plan.	Executive Director, Integrated Seniors Health, Calgary Zone	Draft action plan in place. Target dates may change with circumstances and additional actions may be added.	Dec 4, 2013	Plan drafted and submitted.
1.2	Notify and update CEO Office.	Dec 4, 2013 and then weekly starting Dec 9, 2013	CEO Office informed of Quality Assurance Plan.	Senior Vice President, Calgary Zone	Weekly updates.	Ongoing	Weekly update process in place.
1.3	Develop / submit Final Summary of quality assurance activities during the oversight period.	Review @ Jan 31, 2014	Final documented summary of accomplishments of Quality Assurance Plan.	Executive Director, Integrated Seniors Health, Calgary Zone	.		

2	Theme 1 - Oversight regarding quality and safety issues						
	Action Item	Target Date	Required Outcome	Responsible Party	Progress To Date	Date Completed	Actual Outcome
2.1	Assign AHS individual to oversee the related quality activities.	Dec 3, 2013	Confidence and agreement that quality care is being provided at MTCC and issues have been fully addressed.	Executive Director, Integrated Seniors Health, Calgary Zone	AHS Lead assigned and will be on site Dec 4, 2013.	Dec 3, 2013	On site AHS staff in place.
2.2	Outline expectation in letter of assignment to the identified AHS Lead.	Dec 4, 2013	Expectations are clear regarding the onsite oversight.		Letter sent.	Dec 4, 2013	AHS staff member reports expectations are clear.

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	Action Item	Target Date	Required Outcome	Responsible Party	Progress To Date	Date Completed	Actual Outcome
2.3	Hold weekly meetings with AHS Lead and appropriate AHS stakeholders. Submit written report weekly to Senior Vice President, Calgary Zone	Weekly starting Dec 9, 2013	All parties informed of progress related to this request. Weekly reporting to the Senior Vice President, with escalation as required.	Executive Director, Integrated Seniors Health, Calgary Zone	Scheduled and in progress. Wound care rounds will be weekly or every two weeks, depending on client complexity.	Ongoing Weekly reports submitted Dec 12, 19, 27, 2013; Jan 3, 8, 15, 22, 2014.	
2.4	Meet weekly (at a minimum) with MTCC leadership to monitor progress of oversight activities and address any newly identified safety issues (may include additional focused review).	Weekly starting Dec 9, 2013	Quality issues are identified and acted on in a timely fashion.	AHS Lead (assigned onsite at MTCC)	Scheduled and in progress. AHS lead attending clinical huddles with professional staff. Huddles occur daily at 07:15 and 15:15. Daily participation until January 31, 2014, weekly participation until February 28, 2014; Bi-weekly presence until March 31, 2013. Issues arising: Reporting and Learning System (RLS) investigation completed at SHC on resident transfer related to removal of a catheter. The incident has resulted in a staff reminder to read doctors orders and care plan before action – staff meeting on January 24, 2013. Nasopharyngeal swab testing on	Ongoing.	

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2	Theme 1 - Oversight regarding quality and safety issues						
	Action Item	Target Date	Required Outcome	Responsible Party	Progress To Date	Date Completed	Actual Outcome
					<p>three residents. All results negative. All improving.</p> <p>AHS has started Quality Assurance Review (QAR). AHS QHI leading the review; interviews have been scheduled.</p> <p>Site Skin and Wound Care strategies were reviewed on January 20, 2014.</p> <p>AHS Skin and Wound consultant will visit the site weekly until the end of March 2014, at which time the process will be reviewed.</p>		
2.5	Review recent Quality Indicator reports from MTCC e.g. <ul style="list-style-type: none"> - PPIC reports - Patient Concerns reports - Reportable Incident reports 	Dec 16, 2013	Recent history of quality issues are identified for potential areas of focused review.	AHS Lead (assigned onsite at MTCC)	Complete	Dec.27, 2013	Patient concern reports and Incident reports found to be within normal range for continuing care. Will continue to monitor based through normal process.
2.6	Conduct a site review of skin and wound care and report on same to AHS Lead.	Dec 13, 2013	Any deficiencies are identified.	Integrated Supportive and Facility Living (ISFL) SWAT Lead	<p>AHS Lead assigned and was on site December 4 & 5, 2013.</p> <p>Wound review is complete. Audit reports contain recommendations and actions.</p>	<p>Dec. 6, 2013</p> <p>Dec. 12, 2013</p>	

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2	Theme 1 - Oversight regarding quality and safety issues						
	Action Item	Target Date	Required Outcome	Responsible Party	Progress To Date	Date Completed	Actual Outcome
					<p>AHS lead met with operator – to provide recommendations on December 12, 2013.</p> <p>AHS recommendations have been forwarded and AHS will reassess weekly until issues resolved.</p> <p>Revera wound care pathways are being followed by MTCC staff.</p> <p>Pixilaire computer tracking system will be implemented.</p>	Ongoing weekly assessments.	
2.7	Identify needed skin and wound care improvements to MTCC and monitor implementation.	Dec 6, 2103	Standards are met relative to skin and wound care. CCHSS standards state a policy must be in place to address skin and wound care.	AHS Lead (assigned onsite at MTCC) / ISFL SWAT Lead	Ensure the policy is in place as per CCHSS standards requirements – complete	Dec. 6, 2013	Policy in place
2.8	Conduct a quality review of the Resident Assessment Instrument (RAI) process and ensure RAI outputs are being integrated in care planning and care delivery.	Jan 13 2014	RAI is being used appropriately for clinical care and funding.	AHS Lead (assigned onsite at MTCC)	<p>Ideal number to review is 10% (15 charts at McKenzie Towne). Need to link the RAI assessments outcomes with the care plans.</p> <p>MDS coordinator is on site and supporting staff.</p>	<p>Dec. 19, 2013 completion of RAI chart review.</p> <p>January 13,</p>	

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	Action Item	Target Date	Required Outcome	Responsible Party	Progress To Date	Date Completed	Actual Outcome
					<p>Draft RAI review report completed and submitted to AHS Seniors Health.</p> <p>Report will be circulated to the operator and Calgary Zone operations for review and action on January 17, 2014.</p> <p>Results – coding logic is good. Outstanding issue is the care plan follow up. This action is complete and will be followed up as outlined in 2.9.</p>	<p>2014.</p> <p>Report received January 17, 2014.</p>	
2.9	Develop plan to provide / reinforce staff awareness and education re RAI assessment and subsequent nursing process.	Dec. 20, 2013.	Staff uses the RAI output information to inform client care and client needs are being met though improved care plans.	AHS Lead (assigned onsite at MTCC)	<p>All relevant staff are up to date with Assessment and Intelligence Systems (AIS) competencies.</p> <p>AHS will support oversight of staff education until January 31, 2014. MTCC's readiness to assume this responsibility was evaluated on January 20, 2014.</p> <p>Care Plan review meeting on December 19, 2013. Updates will be made to electronic and printed versions, with AHS lead input. Target is to complete all updates by the end of March 2014. 50 complete by the end of January 2014 and an</p>	Dec. 18, 2013.	

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					<p>additional 100 by March 31, 2014.</p> <p>Checkpoint meeting between AHS and Revera MTCC on January 20, 2014. Of the ten required actions from AHS audit, three are complete. Five to be complete by January 31, 2014. Two actions – care plans and wound care - to be complete by March 31, 2014. AHS will continue onsite presence once a week to February 28, 2014, once every 2 weeks until March 31, 2014. AHS Care Manager and Revera MDS worker are engaged to support sustainability.</p> <p>AHS Wound Care specialist will visit MTCC weekly. Anticipating sign off on March 31, 2014.</p> <p>Recommended future AHS CCHSS Audit to be scheduled within 6-8 months.</p> <p>Revera has an education plan for resistive behavior – details to be provided by end</p>		

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2	Theme 1 - Oversight regarding quality and safety issues						
	Action Item	Target Date	Required Outcome	Responsible Party	Progress To Date	Date Completed	Actual Outcome
					of January 2014.		
2.10	Review and develop a site process for ongoing engagement with and support for families.	Jan 31, 2014	Families are engaged with the site and have input to the developed plan of care.	AHS Lead (assigned onsite at MTCC)	Resident family Council process for patient logs is in place.	Dec. 5, 2013	This requirement was considered to be met in the audit. Complete.
2.11	Determine when "quality of care issues have been fully addressed" at the site.	Review @ Jan 31, 2014	AHS sign off that quality care issues have been addressed; discontinuation of the required onsite presence at MTCC.	Executive Director, Integrated Seniors Health, Calgary Zone	<p>PPIC response – complete</p> <p>Recommendations responded to in AHS and AH audits. complete.</p> <p>Sign off from AHS wound specialist required. Full sign off will require Calgary Zone Operations and AHS Executive approval.</p> <p>January 20, 2014 meeting to discuss ongoing sustainability and sign off process and approach. AHS onsite presence anticipated until January 31, 2014.</p> <p>See plan outline in section 2.9</p>	<p>Dec. 27, 2013</p> <p>Dec. 19, 2013</p>	
3	Theme 2 - Audit for compliance to Continuing Care Health Service Standards (CCHSS) required update.						
	Action Item	Target Date	Required Outcome	Responsible Party	Progress to Date	Date Completed	Outcome
3.1	Conduct AHS audit to CCHSS at MTCC.	Dec 4 - 5, 2013	AHS audit complete.	AHS Calgary Zone Standards and Compliance Unit.	AHS Calgary Zone Team scheduled to be on site Dec 4, 2013.	Dec 4, 2013	Complete.

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2	Theme 1 - Oversight regarding quality and safety issues						
	Action Item	Target Date	Required Outcome	Responsible Party	Progress To Date	Date Completed	Actual Outcome
3.2	Complete AHS Audit Report.	Dec 12, 2013	Audit Report and recommendations forwarded to MTCC for review and action.	AHS Calgary Zone Standards and Compliance Unit.	Complete.	Dec 10, 2013	Complete.
3.3	Alberta Health conducts audit to CCHSS at MTCC.	Dec 5, 2013	Alberta Health audit complete.	Alberta Health Audit Team.	Alberta Health Audit scheduled for Dec 5, 2013.	Dec 5, 2013	Complete.
3.4	Alberta Health completes audit Report.	Dec 12, 2013	Audit Report and recommendations forwarded to MTCC for review and action.	Alberta Health Audit Team.	Complete.	Dec 6, 2013	Complete.
3.5	Review previous CCHSS audit results and related improvement actions.	Dec 13, 2013	Confirmation that and improvement actions have been implemented.	AHS Lead and AHS Calgary Zone Standards and Compliance Unit.	Reviewed previous CCHSS audit.	Dec 11, 2013	Complete.
3.6	Develop action plan for any non-compliant CCHSS Standards.	Dec 19, 2013	Any deficiencies identified in previous audits will be addressed.	MTCC	Dec 2011 Medication issues have been resolved. The care plan issue is unresolved from 2011.	Dec 11, 2013	Unresolved care planning issue becomes part of current audit action plan.
3.7	Review action plan and monitor completion of actions related to current CCHSS improvement plan.	Jan 31, 2014	CCHSS will be met.	AHS Calgary Zone Standards and Compliance Unit and ISFL, Calgary Zone	See plan outlined in 2.9.		

4	Theme 3 Response to Protection of Persons (PPIC) review						
	Action Item	Target Date	Required Outcome	Responsible Party	Progress to Date	Date Completed	Outcome

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4	Theme 3 Response to Protection of Persons (PPIC) review						
	Action Item	Target Date	Required Outcome	Responsible Party	Progress to Date	Date Completed	Outcome
4.1	Review documented chronology of events, planned actions to-date, and actions completed to-date.	Dec 16, 2013	Confirmation that actions completed to-date have been implemented (evidence).	AHS Lead (assigned onsite at MTCC)	MTCC will send the draft response to Revera legal, then distributed. Response sent and received. AHS responded to the response document – sent to B. Huband Dec. 31, 2013.	Dec. 27, 2013	
4.2	Review the recommended actions and implementation plan and timelines.	Jan 6, 2014	Appropriate recommendations made and implementation plan in place.	AHS Lead (assigned onsite at MTCC)	AHS to develop a formal referral process for continuing care based on the suggestion in response to PPIC from MTCC - Complete	January 7, 2014	
4.3	Monitor completion of action items.	Jan 31, 2014	Conditions for future quality care are in place.	AHS Lead	Complete	January 30, 2014	
4.4	Submit report to PPIC (with copy to AHS) on progress and completion of improvement actions.	Jan 31, 2014	Final documented summary of completed actions of response plan.	MTCC	Complete	January 30, 2014	

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5	Theme 4: Confirmation of patient concerns log for all Revera sites						
	Action Item	Target Date	Required Outcome	Responsible Party	Progress to Date	Date Completed	Outcome
5.1	<p>Review of patient concern logs for all Revera continuing care sites in Alberta.</p> <p>Revera Designated Supportive Living (DSL) Calgary:</p> <ul style="list-style-type: none"> Chateau Renoir (no AHS contract) McKenzie Towne Scenic Acres The Edgemont The Heartland (Okotoks) <p>Edmonton</p> <ul style="list-style-type: none"> Riverbend The Churchill <p>Medicine Hat</p> <ul style="list-style-type: none"> Meadowlands <p>Revera Long Term Care (LTC): Calgary</p> <ul style="list-style-type: none"> Bow-Crest McKenzie Towne Mount Royal <p>Edmonton</p> <ul style="list-style-type: none"> Jasper Place Miller Crossing South Terrace 	Dec 31, 2013	Confidence that process is in place and patient concerns are being addressed in a timely manner within an acceptable time frame of 30 days.	<p>Vice President, Primary and Community Care</p> <p>AHS, President and CEO's Office</p>	<p>The Revera site logs have been received and reviewed. AHS can confirm that all were closed within a reasonable timeframe.</p> <p>AHS Patient Concerns logs and AHS Reportable Incidents have been reviewed. AHS can confirm that all were closed within a reasonable timeframe.</p> <p>An additional review of all unwitnessed falls is being undertaken to assess the root cause.</p> <p>Received Falls protocol from MTCC. Fully implemented.</p>	December 27, 2013	