

# Trinity Village

by Lutheran Homes Kitchener - Waterloo

## 2023 Celebrations & Improvements

Date: February 21st, 2024

Department	Celebrations	Improvements
Administration	<p>Launch of Microsoft Teams, an innovative tool to enhance collaboration Site-Wide and with the LHKW Board. Resulting in cost effective measures implemented such as the removal of Survey Monkey as our primary survey platform. Instead, we are using Microsoft Forms, a comprehensive survey solution integrated into our existing Microsoft Office 365 platform. This change provided us with a unified and streamlined approach to gathering feedback and conducting surveys. Additionally, we were able to remove Lucidchart as our primary Org chart platform and currently utilize Vizio that is intergrated into our exisiting Microsoft Office 365 platform. Promoted stewardship by facilitating digital communication through messaging, file sharing, and collaboration tools, reducing the need for paper-based communication and document printing.</p>	<p>Boardroom conference upgrade expected in 2024 TBD - The collaboration kits and advanced conference speaker system will address the current boardroom limitations for more effective and streamlined hybrid meetings. Additionally, the collaboration kit will enhance connectivity and allow anyone, including external members and residents attending tele-medicine appointments, to host/attend presentations on their devices on our new high-resolution TV, seamlessly. Furthermore, the conference speaker with its powerful audio capabilities, eliminates previous limitations, providing a louder and clearer communication experience on both ends. Lastly, the built-in camera within the conference speaker will enhance visibility, creating a cohesive hybrid meeting that gives everyone a sense of togetherness.</p>
Administration		<p>Given the duplication of documents, including manuals, within each department due to staff maintaining their personal copies, there is a need for a reorganization. Each department must undertake a review and update process, considering we now have Microsoft Teams.</p>
Administration	<p>Hired an EA to support the COO &amp; LHKW Board as well as to help organize and streamline processes to work more efficiently and effectively.</p>	<p>Incorporate Teams assistance into maintenance care or alternatively, include Teams access and permission in the HR orientation checklist to ensure all team members are added to the Correct Teams and Channels.</p>
Administration	<p>COO more actively engaged in communicating with staff through increased contribution to staff memos.</p>	<p>Improving accountability and adherence to policies and procedures while leading by example. E.g. attendance, request to change hours, not meeting deadlines, streamlining email requests by utilizing the reports and EMM/TVCC meetings for their intended purpose, &amp; etc.</p>

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Administration	Completed AODA audit with no findings. Introduced new AODA Manual, a testament to our dedication to accessibility! The Manual is accessible both online and in person.	As the COO liaison, it's crucial to emphasize clearer communication to management regarding the complexity of your schedule and the necessity to contact the Executive Assistant (EA). Additionally, it's essential to address the recurring issue of meeting disruptions, which often require rescheduling due to pressing or time-related matters, impacting your schedule. Some management continuously expect meetings without respecting each other's time, leading to challenges in adhering to scheduled meeting times (they also RSVP to meetings they know they won't be able to attend (happened on more than one occasion) and because they don't follow the sick call procedure I am not aware to cancel the meeting which could have been used productively). To add to this statement: Effective communication is essential, yet it's commonly assumed that others understand, even when they haven't been properly informed. E.g. I get looped into things halfway through and I'm happy to play catch up yet sometimes the documents aren't available in Teams for me to review.
Administration	Overall, high amount of positive feedback received from the Mandatory Staff Training Week. We also made sure that the feedback form was user-friendly by incorporating images for rating purposes, making it accessible for those who are non-native English speakers.	Review dashboard format - part of the Annual Review
Administration	We've successfully secured a weekly feature in the Eastern Synod e-newsletter, allowing us to actively engage both the local community and nationwide with the latest updates and events at Trinity Village!	From COO: Completing monthly report (Update monthly report timeline), ERM Dashboard and Goals updates on time, newsletters there are 3 can this be simplified or is three better? Improving the role of Volunteer, Student, and community partner relations. Surge learning modules assigned to the team/committee/department responsible for, assigned modules that are not applicable for by discipline i.e. worker/manager roles, include a praise report in the staff memo to complete, using more features of office 365, e.g. chat function
Administration	Reduction of HR Manager concerns to COO.	Reallocating TVS coding process and TVS agreements/Increases in rates
Administration	Introduction of Visitor handbook, Updated Employee Orientation Handbook and Resident & Care Partner Handbook. Attended new employee and resident & care	TVS to adopt the same agenda and minutes template to streamline processes and enhance communication
Administration	COO participating in all LHKW Board committees streamlining communication.	Combine the Employee Council & Diversity & Inclusion Committee introduce a no cost, self-care initiative such as monthly memos for Trail of the month based on Camino accessed topics- TBD
Administration	Redesigned the ERM dashboard to be more user friendly.	
Administration	One site wide Town hall meeting was held along with a 2024 New Year Update with COO.	
Administration	Attended resident house meetings at TVCC to discuss goals with residents.	

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Administration	Improved HQO House Report Card	
Administration	From COO: improving the master agenda and minute excel workbook, moved required ERM Dashboard stats to Monthly Reports, revision of the HR Department, ES Manager, Quality Care Manager. sub committees (site wide program planning,	
Administration	<p>Resident &amp; Care Partner Wellness Survey Results:</p> <p>Question #4 90% feel residents' privacy is being respected</p> <p>Question #7 85% feel employees care about residents and their well-being</p> <p>Question #9 90% feel the employees are caring and supportive</p> <p>Question #15 94% feel residents have opportunities to participate in activities/programs they enjoy</p>	<p>Resident &amp; Care Partner Wellness Survey Results:</p> <p>Question #16: I feel I/my loved one/residents have opportunities to learn/explore new things that give me/them meaning and purpose. – 71% agree</p> <p>Goal: Increase opportunities for resident to learn/explore new things that give them meaning and purpose from 71% to 75% in 2024</p> <p>Improvement Plan:</p> <p>Question #22: I/My loved one/Residents feel I/they have made meaningful connections with others who live here. – 57% agree</p> <p>Goal: Increase feelings of having made meaningful connections from 57% to 60% in 2024</p> <p>Improvement Plan:</p> <p>Question #24: I/My loved one/Residents feel a sense of belonging here at Trinity Village. – 64% agree</p> <p>Goal: Increase feelings of belonging at Trinity Village from 64% to 68% in 2024.</p>
Administration	<p>CI Inspections/Complaints/Compliments Dashboard Results:</p> <p>98 compliments - #1 method was verbal praise &amp; the 2nd was voicemail</p> <p>Too many variables - need to redo the dashboard</p>	Review Communications & CI/Complaints dashboard in regards to the Inquiries (questions), complaints, and compliments.
Administration	<p>Communications dashboard:</p> <p>Numbers have gone back up from pre Covid (Family Council)</p>	
Administration	Implementation of Praise reports in the COO report to the LHKW Board	

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Administration	Improvement from Visitors Dashboard:  -TVCC - Total Visitors 18337 increase of 5,119 from 2022	
Human Resources	Filled many PSW lines - We did not have to reach out Agency for PSW staffing - we used our internal resources.	Create a first post shift survey that is anonymous for feedback - within HR department
Human Resources	Camino Usage Reduction:  2021 38 - 3 non employee	Camino Usage Stats:  Highest Usage:
Human Resources	Employee Experience Survey Results:  98% of respondents personally value and appreciate their Trinity Village co-workers.  98% of respondents clearly understand their work routine and what is expected of them, and where to find this information.  96% of respondents feel adequately trained to avoid injury, protect themselves from transmission of infectious diseases, and do their job with excellence.  93% of respondents know who to approach when they have a problem or concern.  100% of respondents know under the Occupational Health and Safety Act, they have the right to refuse unsafe work, and must immediately report it to their Manager (Direct Supervisor) or a member of the Joint Health & Safety Committee.  100% of respondents understood that Trinity Village communicates organizational information (e.g. memos, job postings, employee events, etc.) via e-mail. And that they are aware that if they are not receiving Memos from the Staffing Manager, it is their responsibility to check their personal e-mail or ensure the Staffing Manager is informed and e-mail updated ASAP.  96% of respondents consistently receive and read the Memos that are e-mailed to keep employees informed of organizational changes, mandatory requirements, staff wellness, events, etc.	Employee Experience Survey Results:  76% of respondents feel emotionally/mentally safe and protected in their work environment.  70% of respondents have the time required to do all that is asked of them to do their job well.  76% of respondents agreed communication between the organization is good, and expectations are clear.  76% of respondents agreed their Manager (Direct Supervisor) regularly gives them constructive feedback about their work and assists or provides explanation when they need help.  76% of respondents would participate in a multi-cultural or multi-religion celebration event, celebrating our community members (such as a pot luck, or festival) if Trinity Village held one.
IT	Hardware improvements - 20% of computers replaced to bring all computers to good working standard, budget, remote access	Communication - It's better but still too many surprises regarding staffing changes/updates Submit tickets for changes within organization
Finance	Monthly financial analysis, monitoring and reporting with feedback to managers, timely submission of extensive external reporting (COVID, IPAC, PSW Wage Enhancement, OHRS Trial Balance & SRI & ARR, Occupancy Reports, Charitable Return, HST, Lab	Develop a TVS Financial Modeling Tool to better understand operational changes relative to occupancy (internal department goal).

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Finance	Streamlined the PSW wage enhancement in SSC so that manual work is minimized for payroll.	Continue to develop payroll audits (revise and develop new audits)
Finance	Managed the increased reporting to the Board, SDC, & AFC	
Finance	Revised and continue to develop Payroll audits to ensure all is on track.	
Horticulture	Permeable Pathway Project	
Horticulture	Wednesdays in bloom did a survey after to the program gauge the satisfaction. People who used it, really enjoyed it.	Need to focus on the garden blooms between late spring and summer blooms so that we can expand the Wednesday in Bloom
Beeden	A greater interest in the purchase of the honey. Sold out in 49min on-line.	Building up the Beeden Committee
Beeden	Beeden Kiosk	
Health & Safety	New emergency code posters, posted building wide	Review / update of policy & procedures at monthly meetings
Health & Safety	Process improvement with drills including increased communication and table top style	Recruit more staff members
Health & Safety	Incident / Witness Form - NEW	
Health & Safety	Statistics are capturing more detailed data to help improve targeted focus for incident prevention	Transparency with statistics, increasing awareness and sharing more detailed information - put the data in the HQO TV Report Card
Health & Safety	Meetings from bi-monthly to monthly to review updates, statistics and incidents	
Nutrition	Integration of Mealsuite - reduced the amount of food waste.	Shortage of Nutrition Staffing. Specifically 2nd half of cook assist shift
Nutrition	Smooth transition of key roles (2) in the Nutrition department.	CPR expansion to the Nutrition department staff - To be investigated.

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Environmental	Tablets have been introduced - Digital charting was introduced this year and paper documentation has been removed for real time documentation.	Food and items being left behind by other departmental staff, such as PSWs and FSWs - Notify their manager for accountability purposes as the handbook states that whoever sees it first must clean it
Environmental	A change in management also occurred.	Departmental Staff, specifically PSWS, using Housekeeping materials, such as carts for improper use - E.g. keeping the door open by using the carts as a prop - Health and Safety violation. More accountability needs to be held and management is to be notified and request a follow-up response to ensure management provides a solution/investigates.
Environmental		Departmental Staff are not tying up the garbage bags - Education to be sent to staff to ensure they are aware that the garbage bags need to be tied up.
Programming	<p>The Grand Parade 2023 went very well; more resident and family involvement this year. -Able to do more larger group programs together with all houses.- Kept some activities/programs on each house; i.e bingo/birthdaycelebration, special celebrations- higher attendance. - Able to get back to be more environmentally friendly- reusable cups and plates, utensils were purchased for use in the Gathering Place.</p> <p>Return of an in person OMA sessions in the Gathering Place.</p> <p>DementiAbility Training as a group- a lot of support people were there too.</p> <p>InTouchLink working in the common areas.</p> <p>Mobii Technnology - interactive sensory program introduced on each home area.</p> <p>Introduced PetSafe scoop-free automatic litterself-cleaning cat litter box</p> <p>Improved Sunny's quality of life with a larger enclosure for Sunny</p> <p>Streamlined to a regular care partner memos to enhance communication</p> <p>Introduced Java memory program for those in the later stages of dementia.</p> <p>Enhanced stewardship by discontinuing the use of paper products - moved to reusable products.</p>	<p>More outings as this was limited due to outbreaks</p> <p>Re-organizing the Gathering Place better for bigger events</p> <p>Review SSMSE by BSO Team and not recreation *</p> <p>Welbi 1:1 attendance for same residents; you have to input it twice; currently working with Welbi on this.-not a goal as it depends on Welbi</p>

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Programming	Increased volunteer search through advertisement such as CKWR radio station on Volunteer Action Centre's spot	<p>Hire a dedicated volunteer coordinator who can spend the time and resources to recruit, train and retain volunteers.</p> <p>Reviewing volunteer required modules on Surge Learning to ensure information is accurate. A gap noticed with student placements; they do not log into Volgistics so their hours are not captured electronically. These stats are kept on PCC according to student placement coordinator.</p> <p>Allocate a budget to reimburse volunteers for 2 step test and police check costs; these costs vary from physician to physician.</p>
Programming	In person worship resumed & gaps in information filled for Spiritual Care assessments that were missing due to spiritual care gap between chaplains have been completed.	<p>Resuming spiritual care programs on the House- resuming hymn sings, coffee with the chaplain, visits</p> <p>Reviewing the Pastor rotation list to maintain community list</p> <p>1:1 Spiritual Care case loads</p> <p>Working on documentation improvement with Spiritual Care Coordinator</p>
Nursing - MART	<p>No rescue(emergency) medications used within the home</p> <p>Med incidents - goal met for reduction</p>	Order processing
Nursing - Falls & Restraints	<p>1:1 for falls</p> <p>Camera falls reviews</p> <p>Falls intervention list</p> <p>0 restraints</p>	<p>A way for the software to identify which PASD device it is sending notification.</p> <p>NEED TO GET THE GOALS DISCUSSED THIS WEEK - Erin Reducing falls - Need to discuss this topic in depth as 1/3 of the same residents frequently fall. Goal may be postponed until further investigation is completed.</p>
Nursing - RAI MDS	<p>Secured/maintained a coordinator.</p> <p>CMI is also maintained at 1.26</p>	<p>To determine what is the expectation of the House Manager /RAI for care planning.</p> <p>Getting all the nursing committees to know what V2 (MDS Report) is (this includes doctors)</p>
Nursing - Skin & Wound	Last year they fully utilized the Skin & Wound App	Prevention, detection, and further investigation into stage 1 skin tears
Nursing - Tena	Reviewed the usage report and got the tena portrait up to date.	Working on acquiring 10 PSW tena reps. Reducing the amount of resident using pull ups from 16 to 10.

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Nursing - Palliative	<p>Improved process of providing EOL care in terms of providing support to families, introducing new EOL Comfort care kits</p> <p>Improved documentation for PRN pain medication for accountability.</p>	<p>Staff education about difficult conversations, Pain management Early detection of palliative indicators</p> <p>Aim to streamline pain assessment tools from 3 applications to 1.</p> <p>New surge module introduced.</p> <p>Work on reducing or maintaining the following goal: residents with worsened pain on MDS was 12.4%(Jan 2023) to 10.2%(Dec 2023)</p>
Nursing - BSO	<p>Reduced antipsychotic rate by approximately 10% collaborating with MD's, ADORC, RAI, etc.</p> <p>GPA education in house for approx. 50 staff</p> <p>Developed Policy and Procedure as well as job routine, lines, request form for 1:1/Supplemental staffing</p> <p>ELPAS Omni software reports started for easier stats collection</p> <p>Implemented cordless nurse call</p>	<p>Continue to work on improving staff capacity to manage responsive behaviours</p>
Nursing - IPAC	<p>Improved the High touch cleaning process</p> <p>length of outbreaks for both ARI and COVID 19 reduced to under 20 days. Total number of outbreaks for 2023-12</p>	<p>Streamline the interdisciplinary IPAC procedures to follow BP guidelines</p>
Nursing	<p>4 week care plan review HQO and house report card was introduced last year (More indicators also introduced).</p> <p>Nurse Practitioner, Co-Medical Directors, and a 2nd Floor Supervisor joined the team.</p> <p>Reintroduced optometrist</p> <p>Supplemental staffing was introduced into the master schedule.</p>	<p>Review all the processes regarding third party suppliers e.g. hygienist</p>



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Nursing	Celebration from CI Dashboard:  Decrease from 2022 by 13	Improved Upon from CI dashboard:  Decreased type of abuse and improper treatment  Sub categories are physical neglect, staff to resident interactions, and location bedroom E.g. Walnut grove 27, Maple Bush 18, Oak ridge 15, PW 14, and CO 13. Average of 5 CI's per month.
1. TVS TVT Management	Implemented new resident move in welcome letter and handbook. The new website and increased advertisements have increased the number of inquires for tours and waitlist. The Sales Coordinator role has been helpful in marketing, and other areas of the home. New maintenance staff has been a great addition to the teams, efficient, open to tasks and positive feedback from residents, families and vendors. Weekly staff memos going out to all staff has improved site wide communication.	Update Employee Handbook. HW Manager communication training needed. Better Interview process. New staff orientation processes are not being followed consistently. New resident move in processes and current resident new furniture. Will be adding regular steam cleaning in all areas. Decrease the number of bed bug incidences. RM to consistently complete monthly report and goals update on time each month
		More teamwork with staff and strengthening the team.
2. TVS Nursing	Increased number of student placements helped in supporting staff and residents.	Care Conferences, would like to see them held in person as much as possible with input from residents and family.
		Wellness Survey. Have drafted Resident Service Satisfaction survey to send out in 2024 - Reach out to COO before you implement any changes to ensure it's all streamlined.
3. TVS IPAC	Reduction of length of outbreaks for both ARI and COVID 19 reduced to under 20 days - 2 outbreaks in TVS	Would like to use DOCit for staff to sign off on high touch cleaning, more staff education and IPAC "buy in", policy updates needed.
4. TVS Nutrition	Increased resident input for quality improvement within nutrition. Completed a review of the menu and quality of foods going out, which resulted in new menu choices and reduced complaints, concerns. Staff attendance was better than previous years. Had student placements assisting in dining room	dining service has room for improvement - dietary aides do not interact with residents as much as we would like them to. Quality of food going out is hard to maintain consistency with staff change over.
5. TVS Recreation	having new volunteers to run programs, having more resident input this year thru meetings or 1:1 assessments/visits.	communication to residents on day of that programs are happening in order to increase participation. Increase # of 1:1 for residents that do not attend programs. Increase # of volunteers/students. Increase eve and weekend programs.
5. TVS Recreation	Increased resident input for quality improvement within programming.	

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ADP	<p>The team worked really well together. The variety of entertainment went well and the staff/clients thoroughly enjoyed that dancing was brought back as well as singing happy birthday. Having a consistent volunteer benefited the clients and staff.</p> <p>Connecting outdoor projects with horticulture manager (planters, honey, gardens)</p> <p>Celebrating Seniors month with guest speakers each day, make your own pizza and crepe days were a huge success as well as all the art projects that were done, pumpking contest. Being back in the gathering place was very positive as we had convenient access to washrooms, proper working kitchen, a cozier space overall and being closer to other departments. Communication book and end of day debrief was incorporated which staff really liked for planning and were more aware of clients status. Rec staff to complete monthly program calendars as well as care plans (5 clients/month) Increase in client numbers. Increasing client independence by putting jams etc on tables for clients to do on their own. DementiAbility Methods Training went well.</p>	<p>To get more staff and volunteers. More hours for Team Lead/Rec staff to have consistency in staffing and appropriate applicants specifically a full time line.</p> <p>To get a music student in to provide variety of music for clients. To continue to bring more college/university students in; recreation and music therapy. To include families, caregivers and care partners into adp setting with open house or social.(ie summer strawberry social. To start a monthly adp client council where thoughts and ideas can be shared with staff and other clients.</p> <p>To start carts in the gathering place of "grab your own project" where clients can choose to grab their own activity upon arrival while waiting for other clients to arrive and for program to start. To try a fundrasier in ADP - funds can be for program and or subsidy clients. Proper no parking signage in front of care centre so cars dont park in the no parking spot, buses have a hard time getting around when a vehicle is parked there (risk management) To purchase new chairs for the gathering place (healthy and safety)</p>