

## Pioneer Manor 2024 3rd Quarter Report

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### Report Summary

This report provides information regarding a quarterly update with respect to operational issues, activities, and accomplishments in support of resident safety goals, objectives, and good news stories for Pioneer Manor.

### Relationship to the Strategic Plan, Health Impact Assessment and Climate Action Plans

This information report supports Council's Strategic Plan in the areas of Asset Management and Service Excellence and more specifically in Creating a Healthier Community through alignment of the Population Health Priorities of Families, Holistic Health, and the Age Friendly Strategy.

### Financial Implications

There are no financial implications associated with this report.

### Background

This report provides a status update on various topics, such as good news stories, operational activities, accomplishments, updates for the 3rd quarter of 2024. Pioneer Manor is committed to providing a safe, healthy, and respectful environment for residents, families, visitors, and employees. The Home strives towards finding a balance between resident safety and that their quality of life is not being adversely affected by the current safety measures.

### Good News Stories

#### Clinical Nurse Educator

Pioneer Manor now has a Clinical Nurse Educator who will be responsible for providing training and professional development for the staff, ensuring continued delivery of the highest standard of care to the residents.

#### Project SEARCH

During the summer, Pioneer Manor partnered with the Rainbow District School board and the March of Dimes to prepare for the launch of Project SEARCH. The international program offers transition-to-work training to students in their final year of high school. The interns will take part in a mix of classes and hands-on learning while gaining valuable skills which will equip them with practical experience to prepare them for

the work force. The onboarding of eight interns successfully commenced in September.

### **Puppy Power**

Magical Paws is a non-profit organization providing the service of our therapy dogs at no charge to nursing homes, retirement homes, group homes, and schools. Magical Paws has been very active throughout the summer months spreading puppy love to the residents of Pioneer Manor.



### **Olympic Games**

Pioneer Manor put on Olympics game activities for the residents from July 29 to August 7, 2024. Activities included a bocce tournament, javelin, discus and axe throwing, along with target shooting. The team took time to ensure all residents participating had the best time.



### **The Seven Grandfather Teachings**

On September 27, 2024, some residents of Pioneer Manor participated in the Seven Grandfather Teachings informative session led by the Life Enrichment Workers. The Seven Grandfather Teachings are sets of Anishinaabe guiding principles that give people the tools for how to live a good life. They have been passed down from generation to generation for thousands of years through stories and ceremonies.



### **Quality Improvement Plan**

Pioneer Manor purchased new isolation gowns to provide better protection and are easier to don and doff. The gowns will further assist in controlling the spread and duration of infectious outbreaks.

The wander management system has been replaced; this system informs staff of the specific resident who are attempting to exit Pioneer Manor.

In response to recommendations from the food committee, a more culturally diverse menu for residents has been introduced. The Summer menu was focused on lighter options such as salads and sandwiches; salads

included cobb salad, Greek chicken salad, carrot salad, and black bean salad.

Committed to creating a positive, safe space for residents and a healthier and more vibrant community, staff from the diversity, equity and inclusion committee led Pioneer Manor's first Pride week from July 8 to 14, 2024. This event was held to help raise awareness of 2S-LGBTQ+ issues (such as sex, gender identity, cultural bias, stereotypes, fear of discrimination, loss of relationships and wish for acceptance/inclusion) within long-term care spaces.



## Capital Bed Redevelopment

Redevelopment progress continues to move ahead as planned. Since the last update, the building's structural steel framework is now fully complete, with all floors fully erected and concrete poured. The building envelope is nearing completion, providing enclosure for winter construction, and the roof is expected to be installed and completed by end of 4<sup>th</sup> quarter. Work on connecting the new wing to the existing home is ongoing, with electrical upgrades nearly finished. This included the rotation of an existing transformer and the construction of a new concrete-encased trench to house the primary feed cables under the supervision of Greater Sudbury Utilities. New parking lots along the perimeter of the ring-road, as well as touch-ups to some of the existing parking lots, is also now completed ahead of winter.

Renovations in the existing bistro are now underway. This work forms part of the broader plan to integrate the new wing with the existing facility, with structural reinforcements to be completed in several areas.

In the coming months, the focus will shift to the installation of the roof and completing full winterization of the new wing. Renovation work will continue within the existing home, including updates in critical areas, while the connection to the new wing will see further development. The completion of the concrete-encased trench and the installation of new primary feeder cables will pave the way for the next stages of electrical work.



## Inspections

### 2020 to 2023 Ministry of Long-Term Care Inspection Analysis

All Long-Term Care homes across Ontario are inspected with or without notice, by various Ministries and Agencies in response to critical incidents or to discuss complaints/concerns. Additional scrutiny also ensures compliance with various directives and/or bylaws and work is being conducted in accordance with legislation and regulations.

During the third quarter of 2024, the following number of inspections occurred at Pioneer Manor. The Home has addressed all identified areas.

Ministry / Agency	Inspections	Outcome
Ministry of Long-Term Care	1	Compliance order issued.
Mandatory Critical Incident System	20	Seven submissions have been founded and substantiated.
Ministry of Labor	0	
Public Health (IPAC)	0	
Public Health (Institutional Food Safety Compliance)	3	No violations.

### 2020 to 2023 Ministry of Long-Term Care Inspection Analysis

Effective April 11, 2022, the *Fixing Long-Term Care Act, 2021* (FLTCA) and *Ontario Regulation 246/22* replaced the previous *Long-Term Care Homes Act, 2007* (LTCHA) and *Ontario Regulation 79/10* as the governing legislation for long-term care in Ontario. If an inspector or the Director under the act finds non-compliance, they consider the scope and severity of the non-compliance, and the compliance history (up to three years) of the Home to determine the appropriate compliance actions to take under the new FLTCA. Outlined below is Pioneer Manor's non-compliance history from 2021 to 2024. See *Appendix 1* below for potential outcome when the Home is found to be non-compliant with the act or regulations.

Compliance Action	2021	2022	2023	2024
Remedied Non-Compliance	N/A	2	0	0
Written Notification	12	7	10	14
Voluntary Plan of Correction	10	1	N/A	N/A
Compliance Order	0	0	2	1
Administrative Monetary Penalties	N/A	N/A	0	0
Order Requiring Management	N/A	N/A	0	0
Increased Fines for Offences	N/A	N/A	0	0
Investigations	N/A	N/A	0	0
License Suspension and Supervision	N/A	N/A	0	0
Total Areas of Non-Compliance	22	10	12	15

### Written Complaints

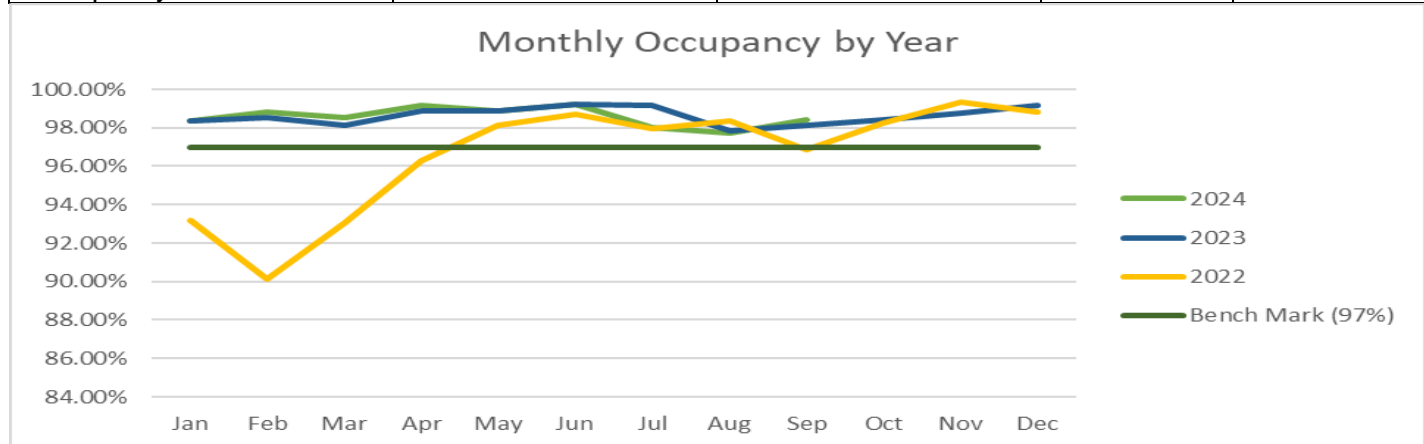
During the third quarter of 2024, the following number of complaints were received by the Home, investigations and responses provided as per the *FLTCA, 2021* and *Ontario Regulation 246/22*.

Council	Received	Outcome
Resident / Family Members	1	Written complaint addressed.
Resident Council	4	Three written complaints resolved; outstanding complaint requires further dialog with Resident Council.
Family Council	1	Anonymous complaint received. Appropriate action took place.

### Key Performance Indicators

2024 Long-Term Care Home Availability				
Facility Name	Beds	# On Waitlist - Basic Bed	# On Waitlist - Private Beds	Total # Waiting
Pioneer Manor	433	446 Total 205 (first choice only)	251 Total 69 (first choice only)	615 Total 274 (first choice only)
Sudbury/Manitoulin	1555	999 (first choice only)	291 (first choice only)	1290 (first choice only)
Resident Stats		2021	2022	2023
Admissions		136	165	139
Discharges		4	6	3
				2024 (Jan. - Sept.)
				96
				3

Deaths	126	154	135	95
Internal Transfers	132	126	100	50
Occupancy Rate	98.80%	96.63%	98.62%	98.56%



## Infection Prevention and Control (IPAC)

### Outbreaks – Third Quarter 2024

Type of Outbreak	Declared	Declared Over	Duration (Days)	Number Impacted	
				Home Area(s)	Residents
Adenovirus & Rhinovirus	July 18, 2024	July 27, 2024	9	Lodge 2	4
Rhinovirus & Enterovirus	July 26, 2024	Aug. 7, 2024	12	Pine	15
	Aug. 1, 2024	Aug. 19, 2024	19	Lilac Mallard	6
COVID-19	July 26, 2024	Aug. 2, 2024	8	Pine	2
COVID-19	Sept. 5, 2024	Sept. 11, 2024	8	Park Place	2



## **Appendix 1**

The Ministry's inspection program focuses on ensuring that licensees comply with the FLTCA and protecting and promoting the quality of care and quality of life for residents. This is achieved by performing unannounced inspections and enforcement measures as required and ensuring that actions taken by the government are transparent. The new proactive inspections program adds to the current program and allows the Ministry inspector to proactively visit each LTC home every year, all the while continuing reactive inspections to promptly address complaints and critical incidents.

The FLTCA includes new and strengthened compliance and enforcement tools to improve resident care and safety. These tools will be used as part of the Ministry of Long-Term Care's (the ministry's) inspection program, which aims to hold licensees to account for the care they provide.

### **Compliance and Enforcement Tools under the FLTCA**

1. Remedied Non-compliance (RN)
  - Provides a way for an inspector to address very low-risk instances of non-compliance during an inspection without having to take further compliance action.
  - Can only be used when a licensee is able to demonstrate they have remedied the non-compliance during an inspection and the inspector is satisfied that the non-compliance caused no harm and created no risk of harm to a resident.
2. Written Notifications (WN)
  - Used to communicate a finding of non-compliance.
  - Unlike the (former) LTCHA, the FLTCA does not allow the inspector to issue a voluntary plan of correction as a possible compliance action.
3. Compliance Orders (CO)
  - Requires a licensee to do anything or refrain from doing anything to achieve compliance with the FLTCA. In addition, must prepare, submit, and implement a written plan for achieving compliance.
  - 2 new aspects of CO that may direct licensee to take a certain action, such as, arrange for specific staff to receive training or allow the ministry/agents/contractors to perform any work or activity at the LTC home at the licensee's expense.
4. Administrative Monetary Penalties (AMP)
  - Intended to encourage compliance and increase accountability for repeated non-compliance through non-punitive monetary penalties.
  - Must be issued if the licensee has not complied with a CO made under the FLTCA; or has not complied with a requirement under the FLTCA and it results in a CO being issued and the licensee has received at least one other compliance order for non-compliance with the same requirement within a three-year period.
5. Order Requiring Management
  - Licensee to retain a temporary manager to assist in managing the LTC home (entire operations or specific issues related to the operations i.e., IPAC, financial or clinical operations). In circumstances present in a LTC home that are harmful to the health, safety, or welfare of residents; or if there is an emergency, for example, an outbreak of disease or a pandemic.
6. Increased Fines for Offences
  - Maximum fines upon conviction of an offence under the FLTCA have doubled. If convicted, fines can be issued in the amount of:
    - \$200,000 for an individual's 1<sup>st</sup> offence and up to \$400,000 for subsequent offence.
    - \$500,00 for a corporation's 1<sup>st</sup> offence and \$1,000,000 for subsequent offence.
7. Investigations
  - Expanding capacity to investigate and lay charges for offences when appropriate.
8. License Suspension and Supervision
  - May suspend a licensee and appoint a LTCH Supervisor to take over the operations of the home.