

1966–2016

A CARING COMMUNITY



Saint  
*Vincent's*  
NURSING HOME



Annual Report  
2016

# Meet our Leadership Team



*Back row (l-r): Scott Muzzerall, Susan Matthews, Kim Wright, Joanna Johnson, Valerie Millington, Debbie Coombs.  
Front row (l-r): Ken Rehman, Angela Berrette, Scott Bell*

## Senior Leadership Team

Angela Berrette, Executive Director  
Scott Bell, Director of Finance  
Ken Rehman, Director Resident Care

## Leadership Team

Senior Leadership Team  
Debbie Coombs, Nurse Manager  
Joanna Johnson, Nurse Manager  
Susan Matthews, Human Resource Manager  
Valerie Millington, Support Services Manager  
Scott Muzzerall, Facility/Maintenance Manager  
Kim Wright, Manager Quality & Education

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# From the Board Chair

On behalf of the Board of Directors of Saint Vincent's Nursing Home it is my pleasure to present the 2015-2016 annual report.

The organization has been busy over the past year working on the strategic plan milestones. Our strategic plan, developed in 2012, provides a framework to ensure responsible stewardship of the resources entrusted to the Board of Directors and the senior leadership team. We will soon start the process of reviewing our plans based on current fiscal restraints and the physical condition of the home. The Board, together with the executive director, are in constant contact with the provincial government for a replacement of our existing facility.

The Board of Directors is responsible for the stewardship and governance of the organization but it is the staff and volunteers who work daily on our mission to provide quality care and services in a home-like environment. I wish to express on behalf of the Board our gratitude to all staff members for their caring attitude and thoughtful respect for our residents and each other, and to our volunteers who make Saint Vincent's a home. Family members, friends, students and caring community leaders provide services that enhance the living experience for our residents. Thank you for all you do.

The Board of Saint Vincent's Nursing Home extends our appreciation to the Saint Vincent's Foundation. The foundation has raised over \$1,000,000 since 2001 for major capital projects, including half the cost for additions to the 4<sup>th</sup> and 5<sup>th</sup> floors. Run by a volunteer Board of Directors, the foundation uses only 5% of monies raised to offset fundraising administrative costs. Their efforts along with our generous donors, contribute to quality of life at Saint Vincent's.

In honour of our 50<sup>th</sup> year we have adopted the tag line "A Caring Community". This is a phrase that reflects Saint Vincent's history of caring which is rooted in our connection to the Sisters of Charity and our namesake, St. Vincent de Paul. Thank you for the part you play in our community.



Leon Fitzgerald  
Board Chair

## Board of Directors

Leon Fitzgerald, Chair  
Barry Allen, Past Chair  
Peggy Gorman, Vice Chair  
Anna LeBlanc, Treasurer  
Angela Berrette, Secretary (ex-officio)  
Denise Arseneault  
Patricia Campbell, SC  
Norine Heselton  
Susan MacLeod  
Mike McDonah  
Gredi Patrick  
Donna Richardson  
Gloria Whalen

## Foundation of the Board

Greg Haverstock, Chair  
Barry Allen  
Angela Berrette (ex-officio)  
Scott Bell (ex-officio)  
Leon Fitzgerald  
Peggy Gorman  
Anna LeBlanc

# From the Executive Director

Friends of Saint Vincent's,

The 2015-2016 fiscal year saw changes in our leadership. In July, Charles Anderson, Director of Therapeutics, a 27-year employee, retired. The former executive director resigned in October and I was appointed in the interim and was happy to accept the position permanently in January. Instead of replacing my previous position, we opted to redistribute the responsibilities, resulting in several changes. The Department of Nursing is now the Resident Care Department and includes both nursing and therapeutic services (recreation, clinical dietitian, pastoral care, physiotherapy, occupational therapy and social work). Ken Rehman, as the newly titled Director Resident Care, is overseeing this natural merger as we continue on our journey to resident and family focused care. Scott Bell, the Director of Finance, took on the responsibility for our maintenance and facility department. The quality portfolio and accreditation responsibilities were accepted by Kim Wright whom we welcomed to the management team as the Manager of Quality and Education. We will continue to evaluate our management structure to ensure we are efficient and poised to meet the resident and family focused care goals.

In 2014, a generous donation from a family member provided funding for education and the establishment of a merit award. The *Leading the Way Award* recognized four recipients this year – Shauna Robinson, Environment Services, Doug Kirby, Nutrition Services, Jackie Daley, RN and Barb Davis, LPN. This is a peer-driven award that acknowledges employees who model our vision, mission, and core values and who demonstrate a commitment to resident and family focused care. They are examples of the leaders we have at every level in the organization.

Fiscally, this year was a challenge. Despite cuts equivalent to almost \$100,000, we managed to break even. Our success in the face of this barrier is, in part, a reflection of the reduction in management which has required the team to accept more responsibility. Although break even means we have avoided a deficit, it does not mean that we had enough money to start with. The reduction in funding has an effect on everything we do and the coming year will be more of a struggle. We have been burdened

with a 1% reduction to our budget; at \$128,000 the ramifications will be significant. The funding levels provided are not reflective of what it costs to provide long term care to the residents of this province. We are committed to maintaining quality care despite the limitations.

In October 2016, Accreditation Canada will perform our on-site survey. The past year has been focused on ensuring we meet the accreditation standards in hopes of maintaining our accreditation with exemplary status.

The leadership team has participated in many external committees including the Community Governed Organizations (CGO), an advocacy organization for non-profit homes in the province; the Continuing Care CCA Working Group; and the Capital District Care by Design Committee. Participating in the sector provides for connection with other facilities who face the same issues and ensures Saint Vincent's voice is heard when decisions are made. I have accepted a position for 2015-2016 on the Continuing Care Council through the Health Association of Nova Scotia. This will provide an opportunity to network within the sector, and provide input to key stakeholders on issues impacting continuing care as well as the provision of these services at Saint Vincent's and in the province. The most exciting work is happening with the local CEO group in HRM. We are reviewing our options for shared services to find efficiencies and savings.

Moving to this role has been rewarding. I am thankful to be entrusted with the task of moving Saint Vincent's forward. I have no doubt with our hard-working staff and dedicated leadership team, we will continue to set the bar for compassionate and innovative care.



Angela Berrette,  
Executive Director

# Board Committee Reports

## Finance & Facility Committee

Anna LeBlanc, Treasurer

The Finance and Facility Committee met regularly throughout the year to monitor the policies, practices and controls on the utilization of Saint Vincent's Nursing Home financial resources and physical assets. The committee reviewed financial challenges, measured financial performance against the budget and forecast, reviewed monthly internal financial statements and presented a committee report at regular Board meetings.

During the course of our 2015/2016 fiscal year several significant items discussed at the committee included:

- Reviewing the operating and capital budgets for the fiscal year April 1, 2015 to March 31, 2016.
- Overseeing the business planning process and deficit management strategies for 2015/2016.
- Monitoring the financial continuous quality improvement indicators.
- Monitoring progress on capital projects and equipment purchases.
- Reviewing the role of the committee in ensuring adequate corporate governance.
- Overseeing the financial audit of Collins Barrow.

Saint Vincent's Nursing Home ended the year with a surplus of revenues over expenditures of \$174,405 as compared to a previous year's surplus of \$127,736. The year ended with a capital fund surplus of \$138,052 and a surplus in operations of \$36,353. The equity position in the capital fund is \$3,105,428 netted against an operating deficit of \$993,391; providing a net equity position of \$2,112,037. The nursing home is dependent on government funding for the operating and capital budget. Our leadership team continues to monitor appropriate asset utilization and deficit management and are in communication with the Department of

**OPERATING BUDGET**  
2015-2016 \$11,916,460  
2016-2017 \$11,802,888  
**-1% of Gross Budget**

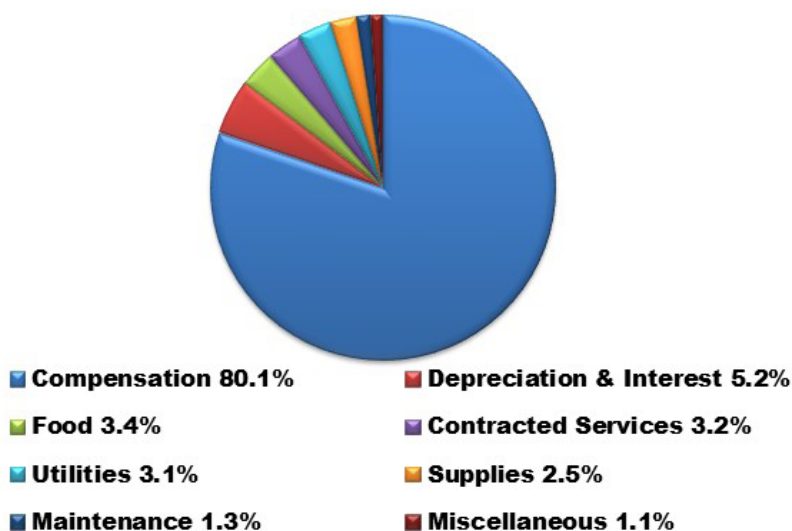


Health and Wellness on funding alternatives versus the reduction of care and services provided to the residents.

Our management and staff are to be commended for their efforts in cost containment to balance expenses to the operating budget provided by the Department of Health and Wellness. The Board has complete confidence in management's ability to meet this continuing challenge in the forthcoming years as we move forward to continue to balance current operations to government funding and plan to reduce our accumulated deficit.

I would like to thank the members of the committee, Mike McDonah, Barry Allen, Jim Francis and the management and staff for their support, assistance and hard work over the past year.

**Expenses By Category**



## Financial Statements (comparison)

Statement of Revenue and Expenses for the year ending March 31<sup>st</sup> from audited financial statements.

### Revenue

|   | 2016           | 2015           |
|---|----------------|----------------|
| Fees from residents                       | \$ 3,590,923   | \$ 3,548,893   |
| Fees from Department of Health & Wellness | 8,682,237      | 8,794,590      |
| Other Income                              | <u>547,983</u> | <u>498,315</u> |
| Total Revenue                             | \$ 12,821,143  | \$ 12,841,798  |

### Expenses

|                                     |                |                |
|-------------------------------------|----------------|----------------|
| Administration, Quality & Planning  | \$ 911,169     | \$ 857,491     |
| Resident Care (Nursing)             | 6,655,858      | 6,733,487      |
| Resident Care (Therapeutics)        | 653,605        | 646,128        |
| Nutrition Services                  | 1,799,453      | 1,817,232      |
| Environmental Services              | 1,115,116      | 1,108,467      |
| Building (Operations & Maintenance) | 875,681        | 902,969        |
| Amortization/Interest               | <u>635,856</u> | <u>648,286</u> |
| Total Expenses                      | \$ 12,646,738  | \$ 12,714,062  |

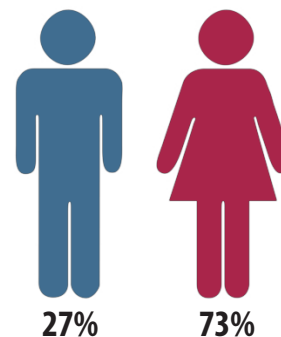
#### THERAPEUTICS

Clinical Dietitian  
Dentist  
Occupational Therapy  
Pastoral Care  
Physiotherapy  
Recreation Therapy  
Social Work

## Resident Turnover

|               | % Increase | 2016   | 2015   |
|---------------|------------|--------|--------|
| Resident Days |            | 53,159 | 53,540 |
| Admissions    | ↑66%       | 88     | 53     |
| Deaths        | ↑27%       | 61     | 48     |
| Discharges    | ↑27%       | 19     | 15     |

#### Resident Population 2015-2016



Funding for all food,  
snacks & beverages  
**\$7.92/resident/day**

# Governance Committee

Norine Heselton, Chair

The Governance Committee provides guidance through policies and practices that reflect Saint Vincent's commitment to quality, accountability and ethical decision-making. Over the past year:

- The committee continued its work to help Saint Vincent's be guided by the strategic plan, to enable leaders at all levels of the organization and entrench quality improvement. The leadership philosophy of Saint Vincent's seeks to create an environment that is open, transparent and collaborative, placing residents at the centre of every decision.
- The committee led the work of the Executive Search Committee to hire a new leader for the facility in January 2016.
- Governance continued information gathering for the development of a plan to promote cultural sensitivity, diversity and equity. This will help prepare for the resident of the future.
- We exercised oversight in a number of areas, including labour relations, non-care related complaints, serious and unusual incidents involving staff, Workers' Compensation Board costs for lost time claims, paid overtime and staff participation in education opportunities. The committee also implemented the Board Self-Assessment Accreditation Survey.
- Saint Vincent's continued to engage in the Community Governed Organization (CGO), particularly in the area of advocacy. The CGO responded to funding cuts by the provincial government, the vacant bed days report and the lack of funding for the Nova Scotia Family Day. We also held several meetings with the Nova Scotia government on funding pressures and the increasing care needs of our residents.
- The committee once again oversaw the Board evaluation process and the annual Board self-assessment Survey, giving directors the opportunity to reflect on their contribution and receive feedback. These tools help the Board improve how it functions.

- We oversaw the annual Board education plan. Topics included presentations by the executive director of continuing care for the province and a senior director of the new Nova Scotia Health Authority on the challenges for continuing care; a comparative financial report of several nursing homes; presentations by management on accreditation, cultural sensitivity, resident-focussed care and a project that reduced the use of antipsychotic drugs; and an update by a city planner on the future of the St. Patrick's High School land and the planning process. We heard Dr. Claire Nolan speak at our 2015 AGM on "Caring for Residents with Dementia –How Not to Get Hurt". This year, Sister Patricia Wilson will speak about the history of St. Vincent de Paul, to commemorate our 50<sup>th</sup> anniversary.

Our WCB rate **\$4.25**  
per \$100 accessible payroll

Industry Average **\$5.19**  
per \$100 accessible payroll



This is the last report of the Governance Committee. The Board accepted the committee's recommendation to reduce the maximum number of Board members from 14 to 10 and to eliminate the Governance Committee by assigning to the Board, the ultimate governing body, the work Governance had done on behalf of the Board. It has been a privilege to serve as chair of the Governance Committee.



*Thank you for taking students and allowing us to have an opportunity to learn in a great, safe environment – staff make it or break it. I definitely enjoyed myself at SVNH.*

*Nursing student*





# Standards Review Committee

Denise Arsenault, Chair

The Standards Review Committee is responsible for ensuring compliance with standards, regulations and legislation related to resident care and services. We monitor quality indicators on resident safety and risk, review quality improvement initiatives and oversee the implementation of Accreditation Canada's standards and survey recommendations.

- This fiscal year our quarterly reports have been on renewed resident and family focused care that aligns care, services and programs more closely with the values of the organization. The report provides statistics on medication errors, falls, incidence of skin tears and incidents involving resident behaviour. A highlight of the quarterly report has been the reduction of our physical restraint rates from 27% in 2014-2015 to 5% in 2015-2016.
- The quarterly report also looks at pain management. Completing the pain assessment on new residents within seven days of admission has improved 22% over last year. Ongoing assessment of pain has improved 38% with the introduction of a new "medication review/prep sheet".
- We review incontinence issues as well. Recently an improved incontinence brief was introduced and we await the evaluation. Urinary tract infections are down 44%. Ongoing hydration is the first step in prevention. Other infection rates, gastrointestinal and respiratory have also seen a decrease as compared to last year – gastrointestinal by 53% and respiratory by 12%.
- Our committee regularly looks at staffing levels. Throughout the year vacancies varied between CCAs, LPNs and RNs. The clinical leads for the units have changed as new hires and internal moves occurred.
- Obtaining appropriate wheelchairs in a timely manner remains a challenge. An increase in occupational therapist hours has made a tremendous difference.
- Flu shots were administered by Dalhousie RN students this year, vaccinating both residents and staff.



*...Having my mother as a resident for the last three years, I appreciate the work and commitment of your staff and management. It must be difficult to always try to be pleasant with residents who cannot (or not always) understand their infirmities, your staff do a great job.*

*A family member*



- We are very pleased Dr. Barry Clarke, Division Head, Care by Design, has agreed to accept the position of Medical Director for a one year term.
- Saint Vincent's participated in the Canadian Foundation of Health Care Improvement (CFHI) with their national collaborative to reduce the inappropriate use of antipsychotic medications.
- Our committee is ever diligent in our effort to watch over abuse issues concerning our residents.

I would like to conclude this report by commenting that over the last few years as chair of this committee, I have attended several meetings of the Community Governed Organizations (CGO) which is comprised of representatives from non-profit nursing homes in Nova Scotia. This has allowed me to see how hard we work here at Saint Vincent's within the available resources to uphold our standards of care. Thank you for the privilege of being able to see behind the scenes, all the hard work and dedication to our residents, of the staff and families alike.

**245 employees**  
worked a grand total of  
**307,000 hours**

# Community Relations Committee

Gloria Whalen, Chair

Community Relations is one of the sub-committees of the Board of Directors. Its purpose is to assist with and monitor programs designed to raise the profile of Saint Vincent's in the community. It's membership consists of Board members Donna Richardson and Susan MacLeod, executive director Angela Berrette, chair Gloria Whalen, community representative Valerie Connors and secretary Nancy Maguire. Over the past year:

- The committee gathered testimonials from family members that were posted throughout the building. These touching quotes demonstrate the effect the staff have on our residents and their families.
- A committee was formed to plan the events which mark our 50<sup>th</sup> anniversary. In June, we held our kick-off event for our year-long celebration. The Spring Fling was a success thanks to the dedicated volunteers. Friends of Saint Vincent's will be invited to our Anniversary Garden Party September 17, 2016 from 2-4 PM where there will be a display of our history and of our vision for the future.
- Other celebratory activities will include a Mass in the chapel in October to recognize our spiritual history and connection to the Halifax Roman Catholic Archdiocese; and an event will be planned for the Sisters of Charity at Caritas to recognize the vital role of the Sisters during our early years and their on-going connection to Saint Vincent's.
- Our strategic plan included an initiative to update our branding. With 50 years in the community we wanted to revisit the message we share with both our internal and external partners to ensure our vision and mission was portrayed by our logo and communication. A branding exercise was completed which reaffirmed our connection to community and caring. We are happy to announce our new tag line "A Caring Community" and present our new logo. A revision to the website will be complete by the fall of 2016.

The committee takes every opportunity to advocate for the residents and wish every happiness to our residents and staff as we continue to provide the best care in our home-like environment.



*...On behalf of my family I want to say how grateful we are for the kind and competent care my mother received from all the fantastic staff who served our mother in any way. That kindness was also extended to my sister and me. The staff were a great comfort to us.*

*A family member*



A **CARING** COMMUNITY

# Programs & Services

## New Initiatives

Employees in all areas are continually finding ways to improve the way we provide care and services. The following are some of the new initiatives in 2015-2016.

- Individualized care plans were revised for each resident collaboratively by residents, families and the other members of the care team. The new plans provide consistent care and assist in the achievement of resident and family centred goals.
- Maintenancecare.com, a facility maintenance software, was introduced. Electronic submissions of work order requests are received by the maintenance team on a handheld device. With our aging facility and an increasing demand for repairs, this system has improved communication and efficiency.
- The Occupational Health and Safety Committee (OH&S) has spent the year working to update their processes. The members received training from AWARE NS to ensure we are meeting the OH&S Act.
- We developed a "Let Me Introduce Myself" information booklet that is given to the resident and family prior to admission. The booklet provides a chance for the resident and family to think about what it is important for us to know about them; such as, social history, hobbies, work history and personal care preferences. Resident and family expectations are important in planning the care for the resident and form the basis of resident and family centered care.
- A new program for residents with inadequate oral intake was implemented. Resource 2.0 is a calorically and protein dense drink given by the nursing staff during medication runs. It replaces the use of other supplements like Boost and Ensure and provides a more consistent supplement intake.
- We have reduced laxative use through the re-implementation of our program that uses prune juice instead of over the counter laxatives. The use of natural products rather than laxatives improves resident comfort.
- Recreation staff have identified a need for meaningful activities during the resident 'down time'. They are working on providing individualized programming for each resident.
- The Infection Control Team revamped the *You Make Me Sick*

booklet and created *What Makes Us Sick* which educates staff on infection control.

- Upon the advice of our clinical dietitian, nutrition services switched the lunch and supper meals. This provides the biggest meal of the day at supper time. Not only is this more in line with resident's experiences in their homes, it provides more nutrition to sustain the resident overnight.
- The SVNH Fire Plan was completely revised to ensure compliance with legislation. The fire marshal is reviewing the document with training anticipated in the fall.
- Towel warmers were installed in the tub rooms on each unit. These have been a big hit with residents who enjoy them before the bath and/or after.
- A new corporate orientation program was implemented to provide a standardized introduction to the organization and consistent messaging on our mission, vision and values.

## Volunteer Services

Saint Vincent's had 141 registered volunteers last year. 17 of these volunteers sat on our Board of Directors or a sub-committee of the Board and put in many hours of work to keep things running smoothly. The remaining 124 were individual volunteers who spent their time working with pastoral care, physiotherapy, meal assistance, and recreation therapy. Together these volunteers put in a grand total of 5,293.5 hours. If paid minimum wage this would cost approximately \$56,640.



We would like to take a moment to thank all of our volunteers who have worked tirelessly to enhance the lives of our residents. Without you we would not be able to provide the quality of care that is currently offered. We are forever grateful to you!

# Strategic Plan Update

The 2012-2017 strategic plan is in its final year. At the next annual meeting we will provide a final report to the community. The six strategic directions cover a wide range of success factors. Work on each has been led by a member of the senior leadership team and supported by members of the leadership team. As we complete the milestones for each initiative we are already looking at what our next plan will include.

The primary focus over the past year has been our journey to Resident and Family Centered Care (RFCC). We focused staff training in areas that are building the foundation which will support a culture shift to a RFCC approach to improving care. All employees were required to attend sessions on dementia (e.g. Teepa Snow videos and discussion), documentation, care planning, resident focused care, and abuse prevention. Orientation of new staff was also a priority as we implemented a new approach to hiring and orientation that standardizes education related to safe resident transfers, communication in dementia, falls prevention, restraints and developing therapeutic relationships. These key areas of education will improve resident safety and set the foundation on which to build our culture shift to a true RFCC model.

**P.I.E.C.E.S**  
**Dementia Training**  
**17 Employees to Date**

In order to truly provide RFCC, we know staff must feel supported through a healthy workplace. Our healthy living fair in May included information booths from our Employee Assistance Program provider Morneau Shepell, CBI Rehabilitation Centre, Medigas, plus other vendors. Supporting staff to manage their stress level and improve their mental and physical health will allow them to better serve our residents.

Building organizational capacity through education and self-directed learning is the cornerstone of our leadership approach. Beyond providing leadership education, we are working on finding ways to support our leaders throughout the organization on a daily basis. Through setting expectations and holding those in leadership roles accountable for the success of their areas, we hope to continue the process of developing leaders at all levels.

With the addition of a Human Resources Manager in 2015 we have focused increased efforts on recruiting staff. We hired 116 new employees this year compared to 60 last year. We know that despite the necessity to recruit, we must also continue to find innovative ways to retain our current employees. This is a challenge in our highly competitive sector.

We have made big strides in the area of safety. Our Worker's Compensation Board rate was once again reduced; we remain below the industry average. A focus on back care and safe transfers have led the way in reducing our accidents. A key change related to resident safety over the last year was improved occupational health services. In response to an identified risk to residents caused by delays in provision of adaptive equipment (e.g. wheelchairs) we increased the hours for our occupational therapist. The result has been a reduction in wait time; residents are receiving the equipment they require to remain safe in a timelier manner.

Through a brand refresh exercise, we have reconfirmed our message to our community. The phrase *A Caring Community* was chosen to represent our organization; it truly speaks to our past and represents how we want to move forward. The new logo provides a revitalized look while keeping the connection to our spiritual roots.

Our volunteers continue to provide enormous support to our programming in the areas of palliative care, pastoral care, fundraising, and recreation. The generous donation of their time and skills is integral to providing for the social, emotional, and spiritual care of residents and families. We are also lucky to have wonderful employees from all departments who also provide meaningful activities on the units.

This year employees provided invaluable support in our fundraising efforts. Over \$1000 was raised for the group of walkers who represented us at the Alzheimer's walk in May. We were happy to provide support to other community partners including Chebucto Links, Feed NS and the Red Cross Alberta Fire Fund. This past Christmas \$10,600 was raised to purchase a bath chair during our second *Gift from the Heart* fundraiser. Internal fundraisers such as 50/50, casual days and bake sales provide extra funds for resident activities.

The limitation of our physical environment is a real barrier; we continue to investigate options for a replacement facility. The formal Saint Patrick's High School land (6067 Quinpool Road) next door has not yet been sold and we hope to work with a developer on possibilities for a new facility. However, we are realistic with our expectations and will continue to look internally for innovative ways to use our existing space.

**OT hours 2014-2015**  
**26/month**  
**OT hours 2015-2016**  
**48/month**

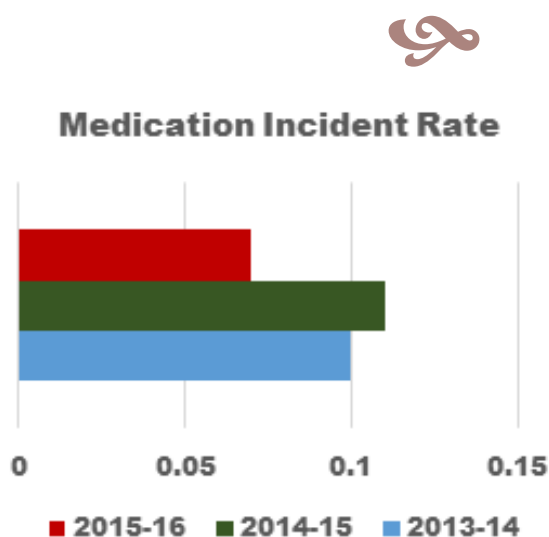




## Quality Initiatives

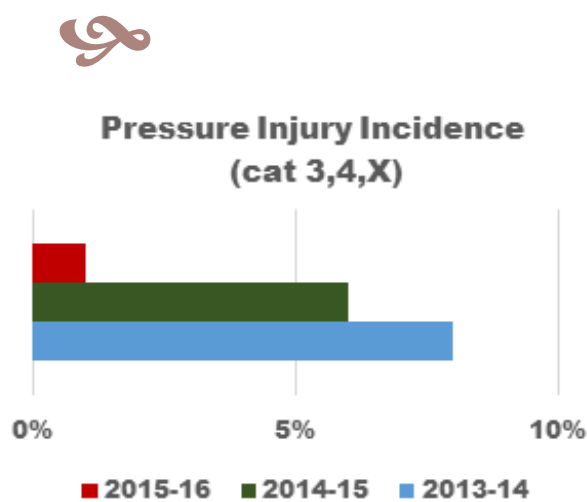
In 2014 Saint Vincent's Nursing Home and Camp Hill Veterans Memorial Building were sponsored by the Canadian Foundation for Health Improvement (CFHI) to participate in a national collaborative project reviewing the use of antipsychotics in our facilities. The goal was to ensure the appropriate use of antipsychotic medications with residents who do not have a diagnosis of psychosis. We exceeded our initial goal (refer to page 11) and reduced the use of antipsychotic medication from 46% to 26% on two of our units with a decrease in the number of residents exhibiting aggressive behaviour. We became more pro-active in the management of responsive behaviours rather than reacting to the behaviour

and asking for medication as a first intervention approach. The initiative will now be spread facility-wide as we educate all staff on approaches to dementia and develop individualized care plans for our residents using interventions that center on the resident's history, likes/dislikes, capabilities, environment and physical health. The initiative involves the participation of our residents, families, all Saint Vincent's staff, physicians and our consulting pharmacist. We look forward to not only spreading the initiative throughout the facility, but also sharing what we have learned and our success with others in long term care throughout the province.



Our medication incident rate has always been low largely because of our nursing staff who check and double check medication orders and medications prior to administration. With the introduction of eMAR within the last two years we have seen our incidents drop even lower.

eMAR is a medication administration software which improves resident safety and streamlines medication administration with the capability to read a barcode label and reconcile that information to the resident's medication record. This helps prevent medication errors and supports residents' rights including right resident, right drug, right dose, right route and right time.



A pressure injury is localized damage to the skin and/or underlying soft tissue usually over a bony prominence. The injury can present as intact skin or an open ulcer and may be painful. The injury occurs as a result of intense and/or prolonged pressure or pressure in combination with shear. Category 3, 4, X injuries involve full thickness skin and/or tissue loss. The incidence of pressure injury that are category 3, 4 or X has decreased dramatically in the last year.

Over the next few months, Saint Vincent's will be developing a pressure injury prevention policy that would implement individual resident care plans to include interventions that address risk factors identified during the resident assessment.

# CFHI Antipsychotic Reduction Project

**46% of residents** on two units at SVNH were **prescribed antipsychotic medication** without a diagnosis of psychosis in **September 2014**.

**Side effects** from antipsychotic medications include: stroke, seizures, increased falls, drowsiness, cognitive decline and death.

Antipsychotic medication use **reduced to 26%** on the two units by **September 2015**

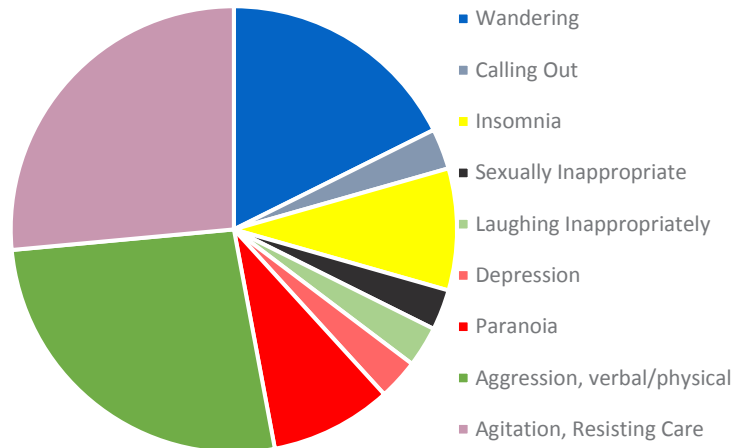
**Behaviors** in older adults with dementia that **do not respond** to antipsychotic medication include:

- Hoarding
- Calling out
- Shadowing
- Pacing
- Wandering
- Insomnia
- Uncooperativeness

**Behaviors** in older adults that **do respond** to antipsychotic medication include:

- Delusions/Hallucinations
- Physical aggression
- Paranoia

## Behavior indicators for prescribing antipsychotic medications September 2014

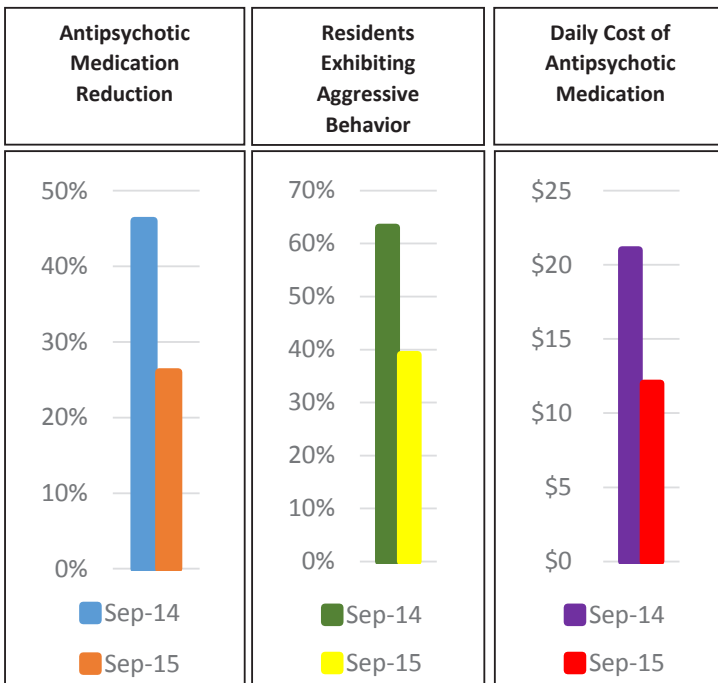


## So...What Have We Learned?

- All behavior has meaning.
- Every resident needs an individualized care plan to ensure consistency of care provided.
- Residents and families need to be involved in the care planning process.
- Education on Dementia Care Approaches for all staff is essential.
- Medication is not always the answer to behavior concerns.
- Communication with the resident, families and all team members is key.
- The reduction of antipsychotics can improve the quality of life for the residents, families and staff.
- This is an ongoing process and needs to be included in discussions at medication reviews, at IRCC, post falls and when there is a change in the resident's status.

**What's Next?**

- To continue the spread of the project throughout the facility
- To continue to educate all staff on care approaches for residents with dementia
- To offer education to families
- To offer support to other LTC facilities with their initiation of the project



## **Mission Statement**

Saint Vincent's Nursing Home is a private not-for-profit home for the aged founded by the Roman Catholic Archdiocese of Halifax. Our mission is to provide quality care and services in a home-like environment.

We are dedicated to fostering a nurturing environment of residents, family, employees, physicians, volunteers and students; one that recognizes their physical, psychological, emotional, social, spiritual and cultural needs. We respect the aging process and support our residents' rights to make choices.

In keeping with this mission and the expressed needs of the community, promoting quality of life is the cornerstone of all care, services and programs.

2080 Windsor Street  
Halifax, Nova Scotia B3K 5B2  
Canada  
[www.svnh.ca](http://www.svnh.ca)



**ACCREDITATION CANADA**  
**AGRÉMENT CANADA**

*Driving Quality Health Services*  
*Force motrice de la qualité des services de santé*

