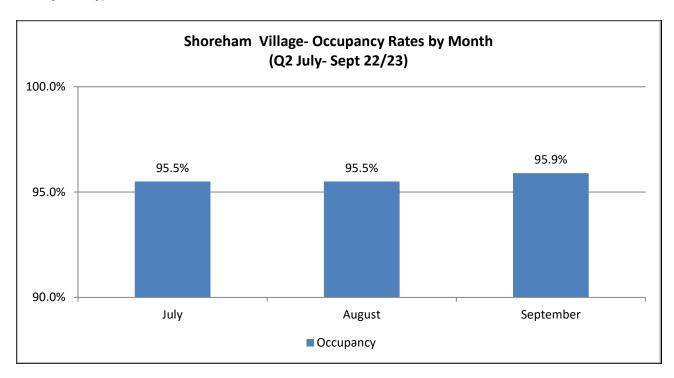


2nd Quarter 2022/23

1.0	Occupancy Rate	2
2.0	Incident Rate	4
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1.0 Shoreham Village Occupancy Rate Q2 July – September 2022/23



The Average Occupancy Rate for the Q2 July – September 2022/23 – 95.6% (3.9 average vacant beds per day).

Comments:

The DHW target occupancy rate for budgeting is 99.2%. For Shoreham Village this equates to an average of .7 vacant beds per day.

The 2nd quarter occupancy (95.6%) rate equates to 3.9 vacant beds per day. The rate is higher than the 1st quarter of 2022/23 (94.9%) and higher compared to the same period of 2021/22 which was 94.57%. This increase in occupancy rate is related to beds being reopened following the completion of the Resident Room renovation project.

The occupancy rate for the respite bed shows an increase in utilization when compared to in the previous two years as shown in Table 1 and appears we are beginning to return to levels previously seen pre-Covid.

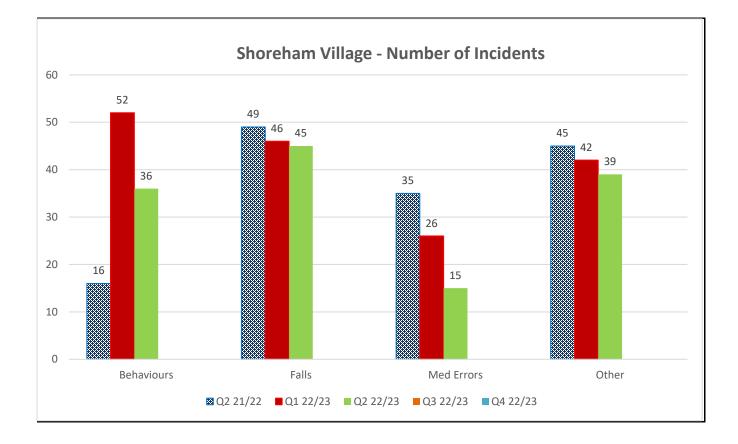
Month	Occupancy 2016/17	Occupancy 2017/18	Occupancy 2018/19	Occupancy 2019/20	Occupancy 2020-21	Occupancy 2021-22	Occupancy 2022-23
April	0.0%	60.0%	43.3%	70.0%	0	13.3%	53.3%
May	71.0%	41.9%	12.9%	35.5%	0	0.0%	35.5%
June	70.0%	80.0%	36.7%	80.0%	0	0.0%	83.3%
July	71.0%	61.3%	64.5%	74.2%	0	29.0%	0

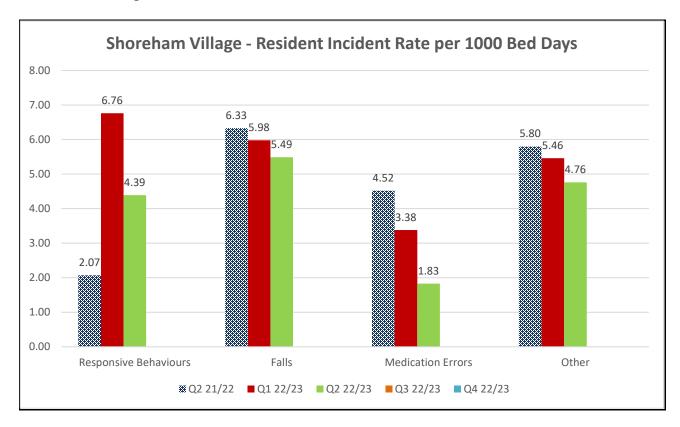
Table 1Respite Bed Occupancy

August	38.7%	87.1%	51.6%	45.2%	0	74.2%	93.5%
September	33.3%	93.3%	73.3%	20.0%	0	66.7%	70.0%
October	77.4%	77.4%	41.9%	0.0%	0	100.0%	70.070
November	40.0%	77.4%	33.3%	0.0%	0	50.0%	
December	77.4%	38.7%	61.3%	71.0%	0	32.3%	
January	45.2%	35.5%	0.0%	45.2%	0	61.3%	
February	3.6%	57.1%	25.0%	82.1%	25%	0	
March	48.4%	45.2%	19.4%	45.2%	0	22.6%	
Total	48%	62.3%	38.6%	47.4%	2.1%	37.8%	56%

2.0 Shoreham Village - Resident Incidents – Q2 July - Sept 2022/23

Total # of Incidents Per Quarter	Q2 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23
Responsive Behaviors	16	52	36		
Falls	49	46	45		
Medication Errors	35	26	15		
Other	45	42	39		
Tota	al 145	166	135		
Incident Rate Per 1000 Resident Days	Q2 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23
Responsive Behaviors	2.07	6.76	4.39		
Falls	6.33	5.98	5.49		
Medication Errors	4.52	3.38	1.83		
Other	5.80	5.46	4.76		
Tota	al 18.72	21.58	16.47		





Comments:

This quarter marks the first that resident quality incident indicator data is being captured and reported through our Risk Management Point Click Care (PCC) module. This has eliminated the need for data to be entered into databases from paper incident reports. Now the data is derived directly from the incident reports generated within PCC. This new process captures resident incidents (falls, behaviors, other). Medication occurrences remain a paper process at this time. We are becoming familiar with the new reporting capabilities and the abilities to drill down the data.

We have noted that behavior occurrences are being captured twice within the system- once from the perspective of the initiator and once from the perspective of the receiver. For clarity and to not artificially inflate our numbers the dyad will represent one incident as opposed to two.

Quarterly, the number (135) and rate of incidents have decreased over the last quarter (166) and decreased over the same period of last year (145). Last quarter we had experienced a noted increase in medication errors attributed to performance concern of an employee no longer employed with us. We also had several new admissions who were being support through their transitions which results in an increase in behavioral occurrences. This quarter sees a stabilization and decrease in both areas.

- Of the 135 incidents 29% were classified as other.
- 10 residents accounted for 93 incidents (78%) not including medication occurrences.

Responsive Behaviors

Last quarter there were 52 incidents and this quarter we have seen a decrease in behavior occurrences, 36. Of these 36 incidents, 23 were involving the same 4 residents.

There were 32 episodes of physical aggression and 2 incident of verbal aggression, 1 episode of self-inflicted injury and 1 sexually non-aggressive occurrence.

All Responsive Behavior incidents continue to be reviewed by the Behavior Support Team.

Gentle Persuasive Approach Training continues to provide the basis of Shoreham Behavior support care. We have an onsite GPA coach and we work closely with our zone Behavior Resource Consultant.

Falls

The number of falls are consistent when compared to the last quarter (46 falls) and slightly improved when compare to the same quarter of last year (49 falls). 26 residents fell. 4 residents accounted for 41.3% of the falls.

- Of the 45 falls 5 were witnessed and 39 were unwitnessed and 1 was during a staff assisted transfer.
- 10 of the 45 falls resulted in no injuries. The remaining had minor injuries from redness or bruising to skin tears, and no falls resulted in a fracture. 1 fall resulted in a transfer to hospital for assessment due to possible head injury. The resident did not require treatment and returned to Shoreham.

All incidents continue to be reviewed on a regular basis by the Manager Resident Care and the mobility team with prevention strategies added to the resident care plans.

Medication Errors

Medication errors have improved this quarter when compared last quarter (26) to the same period of last year (35).

Missed doses account for 40% (6) of all medication incidents. 27% (4) of all medication errors where pharmacy errors. 33.33% (5) of medication incidents occurred on B wing and C wing.

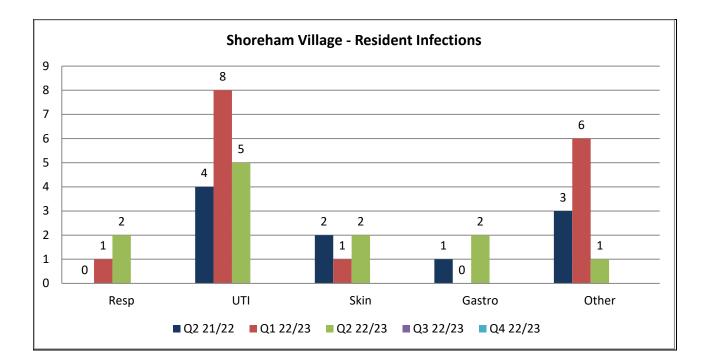
All errors are reviewed with staff involved. There were no errors resulting in injury to residents.

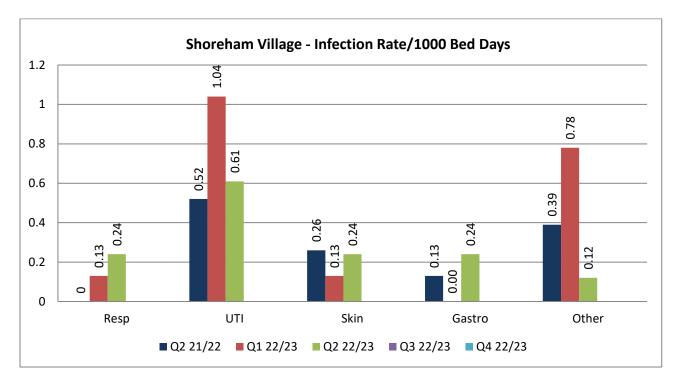
Other Incidents

Of the 39 incidents classified as other 19 were elopement related -- 3 elopements and the remaining incidents staff were intervening/supporting a resident who was attempting to leave, 4 were choking, 15 were unknown. Unknown is the heading in the PCC risk module to capture incidents without a clear label – what we would have previously classified as other (ex. Mechanical lift button wasn't working properly, Resident found in main kitchen turning stove knobs, resident using plastic stick to undo safety belt, wheelchair ran other residents toe).

Total # of Infections Per Quarter	Q2 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23
Respiratory	0	1	2		
Urinary Tract	4	8	5		
Skin	2	1	2		
Gastrointestinal	1	0	2		
Other	3	6	1		
Total	10	16	12		
Incident Rate Per 1000 Resident Days	Q2 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23
Respiratory	0	0.13	0.24		
Urinary Tract	.52	1.04	0.61		
Skin	.26	0.13	0.24		
Gastrointestinal	.13	0	0.24		
Other	.39	0.78	0.12		
Total	1.29	2.08	1.45		

3.0 Shoreham Village - Resident Infection Report – Q2 July - September 2022/23





Comments:

The total number of infections for the 2nd quarter (12) shows an increase over the same period of last year at (10) and a decrease compared to the previous quarter (16).

Respiratory Infections

The number of respiratory infections shows an increase this quarter with 2 compared to 1 in the previous quarter and 0 in the same period of last year.

Urinary Tract Infections

The number of reported Urinary Tract Infections (5) decreased from the last quarter (8) and increased from the same period of last year (4).

Skin Infections

The number of skin infections have increased from the last quarter (1) and remained the same when compared to the same period of last year (2).

Education and review of wound care continues with a designated skin integrity team in place.

Gastrointestinal Infections

There were 2 gastrointestinal infections.

Other Infections (eye, genitourinary, ear, oral)

There was 1 'other' infection.

4.0 Shoreham Village – Pressure Injury Summary – Q2 July – September 2022/23

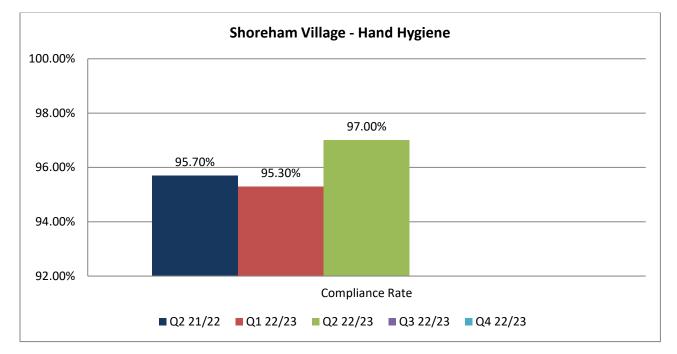
The Provincial Wound Care Program, overseen by Health Association of NS (HANS) collects data monthly through a submission to the Department of Seniors & Long Term Care (DSLTC). Shoreham data is submitted on the pressure injuries (PIs) in the facility on a given date, the last day of the month. This data captures pressure injuries and does not include other wounds ie skin tears, diabetic wounds.

	July	August	September
# of Residents with PIs	2	2	4
# of Stage 2 PIs	1	1	3
# of Stage 3 PIs	0	0	0
# of Stage 4 PIs	1	1	1
# of Unstageable PIs	0	0	0
# of Facility Acquired	0	0	2
TOTAL PIs	2	2	4

Two of these are chronic wounds which the team continues to provide skilled care and interventions for. The wound care team has regular monthly meetings or more frequent if required.

Results	Q1	Q2	Q3	Q4
# of Staff Audited	264	177		
# of Opportunities Observed	1296	787		
# of Opportunities Met	1235 (95.3%)	764 (97%)		
# of Opportunities Missed	61 (4.7%)	23 (3%)		





Comments:

Compliance increased for opportunities met from last quarter (95.3%). Opportunities met increased when compared to the same quarter of 21/22 (95.7%). There is a mandatory education module for all staff to complete annually. Areas scoring under 80% are identified for improvement.

Areas for improvement include:

Areas for improvement include food handling, handling clean linen, feeding and before direct care.

Other Infection control audits were completed which included mask and PPE wearing.

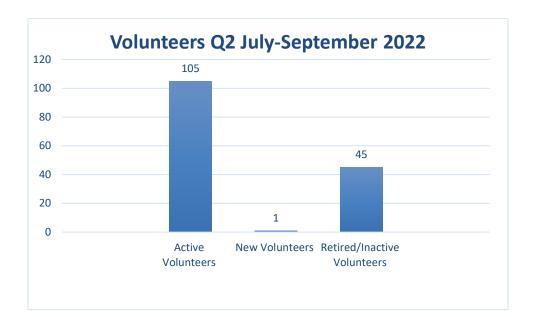
Mask Audit

60 audits were completed with 95% compliance noted! Areas for improvement were related to touching face and mask, not wearing mask at all times and improper use. Staff were coached at the time of the audit.

Infection Control/ PPE audits

29 PPE audits completed with 65% compliance a significant decrease from our previous quarter audit of 86% compliance. The 35% not met was related to issues with conning and doffing PPE, not cleaning shared equipment appropriately, and not changing gloves between tasks.

This is a priority area of attention. Shoreham is currently being supporting by various temporary travel staff and several agencies while we recruit into our vacant positions. The team has identified a gap in their onboarding education and are working to provide additional education and IPAC support. Our IPAC specialist is providing wing huddles to review this data and do on the spot education. We are also working with the Educator and Manager of Care Support to have available pertinent IPAC key messages and education for any temporary relief staff who join the Shoreham team.



6.0 Shoreham Village - Volunteer Report – Q2 July – September 2022/23

Volunteer Recruitment, Training and Retention	Steady or Growing volunteer base
Volunteer recruitment, training and retention-	Shoreham has an aging volunteer list. Over
Covid-19 has had a direct impact on recruiting volunteers	the past two years we have lost volunteers
at this time.	for the following reasons- passing, retiring
	and Covid related reasons. We've also had
Shoreham continues to maintain communications and	many cease responding and participating in
updates with all activities	our volunteer program for 2+ years.
	Shoreham strives to provide a positive
	volunteer experience for both residents and
	volunteer participants. We will continue to
	recruit and grow our program.

	We have had one new volunteer join the program this quarter.
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