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**Shoreham Village**

**Resident Care**

**Scorecard**

**2nd Quarter 2023/24**

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# 1.0 Shoreham Village Occupancy Rate Q2 July – September 2023/24

# The Average Occupancy Rate for the Q2 July - Sept 2023/24 – 99.48% (0.46 average vacant beds per day).

**Comments:**

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

The 1st quarter occupancy rate for 2023/24 was 98.39% (1.44 average vacant beds per day). Q2 saw an improvement in occupancy at 99.48%, which exceeds the targeted rate from SLTC. This Q2 rate is also an improvement compared to the same period of 2022/23 which was 95.6%.

The occupancy rate for the respite bed shows a decrease in utilization compared to Q1. Shown in Table 1.

 **Table 1 Respite Bed Occupancy**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Month** | **Occupancy 2018/19** | **Occupancy** **2019/20** | **Occupancy****2020-21** | **Occupancy****2021-22** | **Occupancy 2022-23** | **Occupancy****2023-24** |
| April  | 43.3% | 70.0% | 0 | 13.3% | 53.3% | 53.3% |
| May | 12.9% | 35.5% | 0 | 0.0% | 35.5% | 93.5% |
| June | 36.7% | 80.0% | 0 | 0.0% | 83.3% | 96.7% |
| July | 64.5% | 74.2% | 0 | 29.0% | 0.0% | 51.6% |
| August | 51.6% | 45.2% | 0 | 74.2% | 93.5% | 19.4% |
| September | 73.3% | 20.0% | 0 | 66.7% | 70.0% | 30.0% |
| October | 41.9% | 0.0% | 0 | 100.0% | 22.6% |  |
| November  | 33.3% | 0.0% | 0 | 50.0% | 43.3% |  |
| December | 61.3% | 71.0% | 0 | 32.3% | 58.1% |  |
| January  | 0.0% | 45.2% | 0 | 61.3% | 12.9% |  |
| February | 25.0% | 82.1% | 25% | 0 | 28.6% |  |
| March | 19.4% | 45.2% | 0 | 22.6% | 45.2% |  |
| **Total**  | **38.6%** | **47.4%** | **2.1%** | **37.8%** | **45.5%** |  |

**2.0 Shoreham Village - ResidentIncidents – Q2 July - Sept 2023/24**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Total # of Incidents Per Quarter** | **Q2 2022/23** | **Q1****2023/24** | **Q2****2023/24** | **Q3****2023/24** | **Q4****2023/24** |
| Responsive Behaviors | 36 | 40 | 39 |  |  |
| Falls | 45 | 64 | 75 |  |  |
| Medication Errors | 15 | 15 | 15 |  |  |
| Other | 39 | 41 | 29 |  |  |
| **Total** | **135** | **160** | **158** |  |  |
|  |  |  |  |  |  |
| **Incident Rate Per 1000 Resident Days** | **Q2****2022/23** | **Q1****2023/24** | **Q2****2023/24** | **Q3****2023/24** | **Q4****2023/24** |
| Responsive Behaviors | 4.39 | 5.02 | 4.7 |  |  |
| Falls | 5.49 | 8.03 | 9.2 |  |  |
| Medication Errors | 1.83 | 1.88 | 1.84 |  |  |
| Other | 4.76 | 5.14 | 3.5 |  |  |
| **Total**  | **16.47** | **20.07** | **19.24** |  |  |

**Comments:**

Shoreham has continued to navigate significant staffing challenges which has required continued reliance on travel and agency staff.

Quarterly, the number (158) and rate of incidents have decreased over the last quarter (160) and increased over the same period of last year (135). The number of incidents per wing were: A – 29, B –26, C – 22, D – 37 and E – 44 .

• Of the 158 incidents 18% were classified as other.

• 17 residents had 3 or more incidents this quarter (excluding med occurrences) and accounted for 104 incidents (73%). 1 resident had 17 incidents, 1 resident had 15 incidents, 2 residents had 8 incidents each, 2 residents had 7 incidents each, these 6 residents had a total of 62 of the incidents (43.3%)

**Responsive Behaviors**

Last quarter there were 40 incidents and this quarter we have seen a decrease in behavior occurrences, 39. Of these 39 incidents, 7 were involving the same resident. 2 residents had 5 incidents each and 2 residents had 4 each. These 5 individuals accounted for 25 incidents (64.1%)

 The number of incidents per wing: A – 4, B – 5, C – 5, D – 6, E – 19.

There were 22 episodes of physical aggression and 5 incidents of verbal aggression and 12 incidents of a sexual nature.

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

We have noted a decrease in behavior occurrences since several new admissions have settled and the team has worked to find interventions to support behavior care. The team continues working closely to support the residents, co-residents and each other to provide a safe environment. We have been supported by continuing care through over cost funding to implement 1:1 support for an identified resident to help redirect them and provide additional precautions to ensure others are safe.

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 have increased when compared to the last quarter (64 falls) and compared with the same quarter of last year (45 falls). 25 residents fell and 14 of those residents had 2 or more falls. 1 resident had 16 falls, 1 had 10 falls, 1 had 7 falls and 1 had 5 falls. These 4 residents accounted for 50.6% of the falls.

* Of the 75 falls 15 were witnessed, 56 were unwitnessed and 4 were during staff assist.

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 remained the same this quarter and when compared to the same period of last year (15) and from last quarter (15).

Missed doses account for 26% (4) of medication errors which is steady compared to last quarter. 13.33% (2) of all medication errors where pharmacy errors. 40% (6) of medication incidents occurred on each C, 33% (5) on D, 13.33% (2) on both A & C and 0 error on E wing.

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

**Other Incidents**

Of the 29 incidents classified as other 4 were elopement/intercepted elopement, 4 were choking, 2 were related to power mobility and 19 were other (ex. Resident sliding under seat belt, resident accused another of wearing their clothes, nose bleed, resident used urinal in front of another’s wife, bedrail in incorrect position)

**3.0 Shoreham Village - ResidentInfection Report – Q2 July - September 2023/24**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Total # of Infections Per Quarter** | **Q2****2022/23** | **Q1****2023/24** | **Q2****2023/24** | **Q3****2023/24** | **Q4****2023/24** |
| Respiratory | 2 | 3 | 7 |  |  |
| Urinary Tract  | 5 | 9 | 16 |  |  |
| Skin  | 2 | 10 | 5 |  |  |
| Gastrointestinal  | 2 | 0 | 1 |  |  |
| Other | 1 | 7 | 5 |  |  |
|  |  |  |  |  |  |
| Total  | 12 | **29** | 34 |  |  |
|  |  |
| **Incident Rate Per 1000 Resident Days** | **Q2****2022/23** | **Q1****2023/24** | **Q2****2023/24** | **Q3****2023/24** | **Q4****2023/24** |
| Respiratory | 0.24 | 0.37 | 0.86 |  |  |
| Urinary Tract  | 0.61 | 1.13 | 1.96 |  |  |
| Skin  | 0.24 | 1.25 | 0.61 |  |  |
| Gastrointestinal  | 0.24 | 0 | 0.12 |  |  |
| Other | 0.12 | 0.88 | 0.61 |  |  |
|  |  |  |  |  |  |
| Total  | 1.45 | **3.63** | 4.16 |  |  |

**Comments:**

No Covid positive residents this quarter.

We have noted an increase in UTI and there were a few instances where additional follow-up and treatment was required. Some are recurrent chronic UTIs. We generally expect to see an increase during the warmer months but this increase warrants additional review.

Now that accreditation has been completed, the team is looking at targeted review to determine what can be done to further reduce preventable infections.

Overall infections were up this quarter from the past quarter (29).

We have had a few residents with extremely difficult infections which inflated the numbers. Two of those residents have passed recently.

**Respiratory Infections**

The number of respiratory infections shows a increase this quarter with 7 compared to 3 in the previous quarter.

**Urinary Tract Infections**

The number of reported Urinary Tract Infections (16) increased from the last quarter (9). We have a couple residents who have recurring UTIs being managed by the team. We also are undertaking a target review to determine what else we can do to reduce infections in this area.

**Skin Infections**

The number of skin infections have decreased from the last quarter (10).

**Gastrointestinal Infections**

There was 1 gastrointestinal infection.

**Other Infections (eye, genitourinary, ear, oral)**

The other infections were oral, eye, and ear infections.

**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 | 3 | 3 | 5 |
| # of Stage 2 PIs |  |  | 3 (1 Acute care) |
| # of Stage 3 PIs | 2 (1 acute care, 1 chronic) | 2 (1 acute care, 1 chronic) |  |
| # of Stage 4 PIs | 1 (acute care) | 1 (acute care) | 1 (Acute care) |
| # of Unstageable PIs |  |  | 1 (Homecare) |
| # of Facility Acquired | 0 | 0 | 2 |
| **TOTAL PIs** | **3** | **3** | **5** |
| **Prevalence (# of P.I / # of ppl on day of report x 100)** | **3.4** | **3.4** | **5.6** |

**In the last quarter there were 2 wounds acquired at Shoreham. The remaining wounds were acquired in the community or while in acute care, or were existing chronic wounds. The wound care team has regular monthly meetings or more frequent if required.**

**5.0 Shoreham Village - Hand Hygiene Report – Q2 July – Sept 2023/24**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Results** | **Q1** | **Q2** | **Q3** | **Q4** |
| # of Staff Audited | 53 | 107 |  |  |
| # of Opportunities Observed | 291 | 546 |  |  |
| # of Opportunities Met  | 281 | 525  |  |  |
| # of Opportunities Missed | 10 | 21 |  |  |

**Comments:**

Compliance decreased for opportunities met from last quarter (96.5%). Opportunities met decreased when compared to the same quarter of 22/23 (97%). There is a mandatory education module for all staff to complete annually.

Areas scoring under 80% are identified for improvement, we did not have any areas scoring below 80% however areas for improvement include hand hygiene prior to handling clean linen, and before assisting with meals. 7 missed opportunities were with the same individual, so they had 1:1 coaching completed by the infection control specialist. An additional reminder communication has been sent to all staff.

**6.0 Shoreham Village - Volunteer Report – Q2 July – Sept 2023/24**

|  |  |
| --- | --- |
| **Volunteer Recruitment, Training and Retention** | **Steady or Growing volunteer base** |
| Covid-19 has had a direct and lasting impact on recruiting volunteers at this time.Shoreham continues to maintain communications and updates with all activities  | Our volunteer department has remained steady with no change. In the next quarter all active volunteers are being contacted to update information and review current volunteer assignments. Shoreham strives to provide a positive volunteer experience for both residents and volunteer participants. We will continue to recruit and grow our volunteer base.  |