
2023 Business Plan & Budget

Golden Plough Lodge

Prior Year Accomplishments

Economic Prosperity & Innovation

Identification and maintenance of operational efficiencies and implemented service improvements. In efforts to increase those efficiencies and LEAN processes, there are several projects in place that support innovation and best practices.

Sustainable Growth

The Senior managers continue to collaborate with the Golden Plough Lodge Redevelopment Project Team. This has been an excellent opportunity to give needed and relevant input. The team meets regularly to discuss progress and adjust as development progresses.

Organizational Review



In December 2020 an invitation for proposals was issued by Northumberland County for a staffing and resource review of the Golden Plough Lodge. Specifically, resources as it applies to legislated service delivery where the LTCH will meet and/or exceed the Ontario Ministry of Long-Term Care standard and the Long-Term Care Homes Act (LTCHA), and, the “EDEN” philosophy of care. The evaluation will consider the Home’s 151 bed compliment and forecast the needed resources for the planned expansion to 180 beds at the new LTCH scheduled to be completed in late 2022. Transitioning to the Ministry recommended four (4) hours of care per resident per day, the successful respondent will provide insight into the resources needed to meet this benchmark now and in the new home. The review will also provide staff with a better understanding of efficiencies within other departments and how they may be implemented in the new facility.

Leading Edge Consultants

In addition to the staffing evaluation mentioned above, the GPL has retained the Leading-Edge Group as a LEAN consultant. This review entailed a “deep-dive” into our current processes and provide a comprehensive analysis to reduce/eliminate waste and improve efficiencies within our daily operations. In addition, Leading Edge will advise on transition, scheduling, staff buy-in and support strategies, etc.

Four Hours of Care per Resident per Day

As part of this initiative, senior staff have been adding front-line position to serve our Residents including all disciplines (RN, RPN, PSW, Social Work and Physio). The County of Northumberland on behalf of the GPL will receive sustained financial support from the MLTC beginning 2021/2022 fiscal year and continuing to 2024.

Thriving & Inclusive Communities

The development and completion of a Golden Plough Lodge Diversity Plan; examining, planning, and addressing the needs of current and future resident population is something that happens daily. Due to the COVID 19 pandemic, the Golden Plough Lodge team has been hypervigilant in keeping Residents and staff safe. Enhancement of a resident focused community through active practice of the Eden Alternative Philosophy of Care and exploring opportunities to collaborate with internal and external partners such as Northumberland Community Paramedics, and Ontario Health Teams Northumberland continues to be a priority.

Leadership in Change

Infection Prevention and Control Regulatory Compliance and Best Practices



The Long-Term Care Homes Act Reg. 79/10, s. 229 “Infection Prevention and Control (IPAC) Program ” states that: *(3) The licensee shall designate a staff member to co-ordinate the program who has education and experience in infection prevention and control practices, including:(a) infectious diseases; (b) cleaning and disinfection; (c) data collection and trend analysis; (d) reporting protocols; and (e) outbreak management. Further, that staff member has the education and experience in infection prevention and control practices.*

The goal of an IPAC program is to:

- protect residents from health care-associated infections, resulting in improved survival rates, reduced morbidity associated with infections.



- prevent the spread of infections amongst residents, health care providers, visitors, and others in the health care environment.

To achieve these goals in a cost-effective manner, an active, effective, organization wide IPAC program must be developed, and its implementation must be continuously supported by senior administration. The IPAC program must clearly be the responsibility of at least one designated person. Regardless of the size of the facility, the expected number of hours per week that are devoted to IPAC must be clearly stated in the institutional policy and implemented. (Public Health Ontario, *IPAC for Long-Term Care Homes*. Dec. 2020).

This initiative was supported by County Council and 2022 represents the first year the GPL has had dedicated staff for its Infection Prevention and Control Program.

CARF Accreditation 2022-2025

CARF's mission, vision, core values, and purposes

Mission

The mission of CARF is to promote the quality, value, and optimal outcomes of services through a consultative accreditation process and continuous improvement services that center on enhancing the lives of persons served.

Vision

Through responsiveness to a dynamic and diverse environment, CARF serves as a catalyst for improving the quality of life of the persons served.

Core values

All people have the right to be treated with dignity and respect.

All people should have access to needed services that achieve optimum outcomes.

All people should be empowered to exercise informed choice.

CARF's accreditation, research, continuous improvement services, and educational activities are conducted in accordance with these core values and with the utmost integrity.

In addition, CARF is committed to:

The continuous improvement of both organizational management and service delivery.

Diversity and cultural competence in all CARF activities and associations.

Enhancing the involvement of persons served in all CARF's activities.

Persons served being active participants in the development and application of standards of accreditation.



Enhancing the meaning, value, and relevance of accreditation to persons served.

Purposes

In support of CARF's mission, vision, and core values, CARF's purposes are:

- To develop and maintain current, field-driven standards that improve the value and responsiveness of the programs and services delivered to people in need of life enhancement services.
- To recognize organizations that achieve accreditation through a consultative peer-review process and demonstrate their commitment to the continuous improvement of their programs and services with a focus on the needs and outcomes of the persons served.
- To conduct accreditation research emphasizing outcomes measurement and management, and to provide information on common program strengths as well as areas needing improvement.
- To provide consultation, education, training, and publications that support organizations in achieving and maintaining accreditation of their programs and services.
- To provide information and education to persons served and other stakeholders on the value of accreditation.
- To seek input and to be responsive to persons served and other stakeholders.
- To provide continuous improvement services to improve the outcomes for organizations and the persons served and their community of influence.

The GPL has been preparing evidence for our CARF review over Q2-3 of the 2022 budget year. We anticipate a successful evaluation in late September or early December.

2023 Service Objectives & Initiatives

Economic Prosperity & Innovation

Digital Meal ordering system





The County of Northumberland/Golden Plough Lodge put out a request for proposals to implement an All-in-One Dining Solution Software System to be used for the Golden Plough Lodge LTC Dietary department. The County awarded the contract (Continyou Care) based on the system that best supports the County's vision and mission and is innovative in transforming the current process for Dietary Services and the future process for Dietary Services that are efficient, effective, and easy to use. The solution will reduce waste, stream-line communications and reduce meal wait times. Specific to COVID type situations where outbreaks are declared, this solution will assist with in-room dining, help reduce time spent by staff collecting orders and connect families with residents via zoom technology allowing them to see in real time how their loved ones are doing in the Home with dining.

The current Dietary Service processes are labour intensive. This new solution will provide users with an easy to use, timesaving, seamless way to create, review, edit, finalize, and approve (multiple approvers) menu's, production, inventory, and reports.

The GPL software and services will provide an opportunity to customize/configure its menu's, resident profiles, and audits/reports. Desired features include (but are not limited to):

- Ease of learning, ease of teaching/training, ease of use.
- Ability to easily search for residents, recipes, reports, etc. using various criteria, and produce quick and complete results.
- Automated workflow including standardized, accessible report templates.
- Easy and secure way for delegated Administrator staff to assign and change security permissions/access and protocols.
- Standardization of all document templates including reports, recommendations, proclamations, by-laws, ("locked down" to prevent users from changing formats).
- Use existing portable technology, including iPads, desktops, laptops, tv's and iPhones.

Sustainable Growth

Maintenance/refurbishment of existing infrastructure to ensure optimum resident care and provide a healthy, safe work environment and working conditions

GPL/NCAM Rebuild



In December 2020, the County received all required permits and authorizations to officially award the contract for the construction of the new GPL/NCAM to Matheson Constructors Ltd (the Contractor). The Contractor mobilized to site and began construction on December 14, 2020. County Staff continue to consult and collaborate with Town of Cobourg Staff on any concerns that arise during construction

and any other documentation required by the Town. In addition, County Staff continue to collaborate and consult with our internal and external stakeholders such as GPL Staff and our neighbours. Due to many logistical challenges, the County Project Team is working closely with the Contractor (Matheson Constructors Ltd.) to develop an updated date of completion.

Bi-weekly construction meetings continue to be conducted with representatives from County Project Management Staff, the Contract Administrator (Salter Pilon Architecture), members of the Consulting Team (as required), the County's Site Representative (BTY Group) and the Contractor (Matheson Constructors Ltd.) where site activities are discussed.

Existing Aging Facility



The current facility is well beyond its expected life span and needs constant maintenance and repair. The 2022 budget year appreciated a drastic reduction in forecasted capital spending as the facility was slated to be retired in late 2022. As the transition is now delayed and a new move date not negotiated, there will be a significant impact on the County Levy to do much needed maintenance and repair to the facility's infrastructure. E.g., hot water tanks, boiler M&R, failing windows, failing structure (brick wall separation), insufficient staff parking,

insufficient A/C as per legislation, etc.

Issue Paper attached



Air Conditioning

Amendments to Ontario Regulation 79/10 (Regulation) under the Long-Term Care Homes Act, 2007 (LTCHA) were made to enhance cooling requirements for long-term care (LTC) homes. The following amendments will come into force on May 15, 2021: Every designated cooling area in the LTC home is required to be served by air conditioning which is operated as necessary to maintain the temperature in designated cooling areas at a comfortable level for residents during specified periods. The written “hot weather-related illness prevention and management plan” was renamed as the “heat related illness prevention and management plan.”

Licenseses are required to implement their heat related illness prevention and management plan for the LTC home every year during the period from May 15 to September 15, and on any day on which the outside temperature forecasted by Environment and Climate Change Canada for the area in which the home is located is 26 degrees Celsius or above at any point during the day; and o anytime the temperature in areas of the home in which measurements are required by the Regulation reach 26 degrees Celsius or above, for the remainder of the day and the following day.

This legislation was again amended in the “Fixing Long-Term Care Homes Act April 2022 to include A/C in Resident rooms. The current infrastructure is not keeping up with this demand and the power supply to the home is not robust enough to expand beyond the current wattage draw and therefore additional roof-top units are not advisable. A Comprehensive assessment and quotation have been requested for both updating the GPL power supply, and adding additional cooling to the home.

Scheduling Support – Increase 0.75 to full FTE

Currently the Organization chart call for a Part-Time non-union Ward Clerk/Scheduler. This is approx. 0.75 of a full FTE. The GPL has had much need of scheduling support in this climate of difficult recruitment and retention, COVID, etc. resulting in increased daily absences requiring short-notice replacements and taxing the one FTE in the scheduling office. The GPL has been unable to attract and retain a support scheduler in a part-time role. As we struggle with retention, I have had to bring in contract support which is impacting the operating budget. We believe it necessary to:

1. Increase the position to a full-time scheduling support clerk (non-union) and,
2. Change the report structure to the Administrator which is in-line with the existing FTE.
 - Issue Paper Attached

Bed Allocation Coordinator

The GPL has a full-time Bed Allocations Coordinator which is a CUPE accommodation. This position was created in February 2017 which was a culmination of existing

duties/responsibilities of the Home. In anticipation of the increase of 29 beds and the pressures of maintaining consistent admissions from the community and from hospital ALC beds, we have identified that this position is integral to maintaining regulated occupancy and admission rates as well as daily operations as it relates to:

- Managing the internal wait lists for residents requesting bed moves
- Contacting external service providers to arrange personal care services for residents
- Liaise with the CELHIN for discharges, admissions, data collection, etc.
- Manage flow of communication to wait-list applicants via Health Gateway Portal
- Applicant acceptance notification
- Scheduling Resident Care Conferences
- Manage PHIPA and report to the Power of Attorney
- Maintain Essential Caregiver database
- Schedule and facilitate home tours for potential residents and families
- Other duties as assigned

Issue Paper attached

Thriving & Inclusive Communities

Continuance and enhancement of community partnership development, existing partnerships strengthened and expanded as appropriate and opportunities arise.

Ongoing solidification and implementation of a resident focused community through practice of the Eden Alternative Philosophy of Care.



The Golden Plough Lodge adopted the Eden Alternative Philosophy of Care as the philosophy and decision-making framework for our resident focused model of care. Founded in 1991, the Eden Alternative is based upon the creation of a resident centred community through;

- Development of close, loving relationships
- Regular and meaningful contact with plants, animals, and children
- Placement of maximum possible decision-making authority with our residents, and
- Recognition of medical care as “the servant of genuine human caring, never its master”.

Continued close engagement with Golden Plough Lodge staff members, residents, families, Councils, and volunteers to ensure active participation in Continuous Quality Assurance

Leadership in Change

Establish a formal process for timely renewal of the Golden Plough Lodge Strategic Plan, aligning with Northumberland County Strategic Planning process and content. We will Continue to enhance employee training, education and engagement through collaborative focus groups, joint internal committees, and ad hoc working groups. Due to of the pandemic and in response to the “new normal”, GPL has adopted a digital learning solution to assist in facilitating education when face-to-face is not possible. Staff scheduling will be updated in 2022/2023 to an efficient platform that communicates effectively with County payroll. This new solution will increase ease of scheduling, decrease wait time to fill short notice vacancies, speed up the call-in process and offer secure staff viewing of the electronic schedule. The Leading-Edge Group has made this one of the LEAN priorities for their report. In addition, the consultants will be advising on change management as we prepare to move operations to the new facility.

Long Term Plan & Strategic Objectives

Economic Prosperity & Innovation



Continued prudent fiscal management, examination of possible funding sources, maximizing existing resources. Looking ahead, I would like to assist in future opportunities to collaborate with the County Paramedic Department and OHT Northumberland. The Golden Plough Lodge wait list remains consistent at approximately 300+ at any given time which equates to almost 2 years. A partnership with Community Paramedicine and LTCHs would be of great benefit to those mid to high acuity residents in Northumberland County waiting for space. It is encouraging to see that there is some year-to-year funding to the County Paramedic Department supporting a stay-at-home strategy through the Community Paramedic Program. This initiative is part of the province's modernization plan to address systemic barriers in long-term care bed development and the growing demand for long-term care.

CPLTC will be delivered by selected municipalities and District Social Services Administration Boards (DSSABs) in partnership with Local Health Integration Networks (LHINs) and Ontario Health Teams. where applicable. The purpose of the program is to keep individuals who are on the long-term care wait list. or who are soon to be eligible for Long-term care, stabilized in their illness trajectory and in their own homes for as long as possible. The program will do this through preventive and responsive care, such as home visits and remote patient monitoring.



Sustainable Growth

Maintenance/refurbishment of existing infrastructure to ensure optimum resident care and provide a healthy, safe work environment and working conditions. See Issue Paper.

Thriving & Inclusive Communities

As outlined above, continuance and enhancement of community partnership development, existing partnerships strengthened and expanded as appropriate as opportunities arise.

Ongoing solidification and implementation of a resident focused community through practice of the Eden Alternative Philosophy of Care. Continued close engagement with Golden Plough Lodge staff members, residents, families, Councils, and volunteers to ensure active participation in Continuous Quality Assurance.

Leadership in Change

Establish a formal process for timely and ongoing Golden Plough Lodge Strategic Plan review, aligning with Northumberland County Strategic Planning process and content. Continue enhanced employee training, education and engagement through collaborative focus groups, joint internal committees, and ad hoc working groups. 2023 will be an exceptional year for change on many fronts. The GPL has retained the Leading-Edge Group to assess and advise on significant change management strategies. These initiatives will be vital in maintaining staff engagement through the move to the new facility, resolving labour contracts, and implementing improved processes.

2023 Issue Paper

Golden Plough Lodge – Scheduling Support Clerk

Purpose

To change the current .75 FTE Scheduling/Ward Clerk position, to a full FTE position in the Golden Plough Lodge (GPL) departmental organization chart with additional costs for salary and benefits to be added to the 2023 budget.

Background

The Ward Clerk position was created long ago, and duties merged to make a staff accommodation, adding in scheduling support. At that time existing duties were bundled together; Ward clerical took most of the .75 FTE with occasional Scheduling support. This ratio is now flipped, and the bulk of time is spent supporting scheduling to fill short-notice absences. In anticipation of our new home, with 29 additional residents, and maintaining staffing levels, this demand will only increase. The intent moving forward will be to change the job duties to reflect the demand on staffing and the acumen required to work within the current and or future digital scheduling solutions. This position will report to the Administrator as does the current FTE as scheduling reflects the entire home. This position will:

- Provide daily support to scheduling vacancies both short notice and future
- Provide back-up coverage to the weekend reception in the front off as well as short notice vacancies
- Collaborate with the entire admin team regarding monthly schedules and support as needed
- Resident chart filing and archiving duties as assigned
- Other duties as assigned
- Assists with new orientation as it relates to scheduling and staff availability submissions
- Provide reception support when needed.

Consultation/Options

Eastern Ontario LTCH group, senior management team



Financial Impact

As per existing position (non-union) *

Current hourly rate including benefits	Hours	Rate/HR	Annual including Benefits
Current 2022	1412	26.77	53,971
Proposed 2023	1820	26.77	67,393
Increase to Budget 2023			13,422

Risk Considerations

Risks include an inability to maintain proactive strategies in the scheduling department and reduce/eliminate short staffing which is an actual risk currently. Reduce or eliminate schedule related grievances and improve staff engagement due to accurate scheduling and payroll submission.

Impacts to Member Municipalities/Partners

N/A

Included in 2022 Long Term Plan: NO

In consultation with Managers, Staff, Union executives it has become increasingly evident that this support position is not sufficient in its current state. The new Golden Plough Lodge will require an increase to our staff compliment and therefore the scheduling department needs to grow with it.

2023 Issue Paper

Golden Plough Lodge – Bed Allocation Coordinator

Purpose

To change the current Full Time (accommodated) Bed Allocation Coordinator, to a permanent Full-Time position in the Golden Plough Lodge (GPL) departmental organization chart with associated job evaluation, and costs for salary and benefits to be added to the 2023 budget.

Background

The Bed Allocation Coordinator position was created in Feb. 2017. At that time existing duties were bundled together to create this accommodated position. In anticipation of our new home, with 29 additional residents, and maintaining consistent admission processes including increased pressures from local Hospitals to admit from their Alternate Level of Care (ALC) beds, we have identified that this position is an integral part of the legislated occupancy and admissions rates. Aside from admissions, the Bed Allocation Coordinator is instrumental in daily operations as it relates to:

- Managing GPL's internal wait list of residents requesting bed moves; Coordinate all internal resident room moves
- Contacting external service providers to arrange services for residents; Discharge notification to the LHIN
- Collecting health data required by the LHIN to facilitate resident transfers between long-term care homes
- Manages flow of communication to waitlist applicants via the Health Gateway Portal as well as applicant acceptance notifications
- Distribution of admission surveys; Maintaining accurate listings of priority access bed (Veterans, Spousal Reunification)
- Monitoring the flow of documentation received through the Health Gateway Portal and distribution of same to the LHIN
- Scheduling of all Resident Care Conferences and maintain this schedule for the Physicians, Managers and Residents
- Gathers all Personal Health Information (PHI) documents and prepare monthly reports for the Power of Attorney (POA) as requested
- Maintains Essential Caregiver consents and contact information



- Schedules and provides whole home tours with prospective residents and their families
- Assists with new orientation packages and tours for new hires and students
- Data collection for Ministry’s “Ask Health Data” weekly and monthly surveys
- Other duties include backup for Essential Caregiver Screening/Swabbing when required
- Provide reception support when needed.

Consultation/Options

Eastern Ontario LTCH group

Financial Impact

Position to be evaluated*

Current hourly rate including benefits	30.20
Yearly	58,890.00

Risk Considerations

Risks include an inability to continue to offer the exceptional level of service that is currently being provided through the accommodated position, as well as the inability to consistently meet MOHLTC standards for new admissions as well as supporting residents, families and Golden Plough Lodge staff.

Impacts to Member Municipalities/Partners

N/A

Included in 2022 Long Term Plan: NO

In consultation with Managers, Staff, Residents and Families, it has become increasingly evident that this accommodated position be a permanent position and is required to ensure appropriate and satisfactory levels of quality service. The new Golden Plough Lodge will increase our resident population and bed allocation services surrounding this increase. This has heightened the awareness that the Bed Allocation Coordinator is required to be a permanent position.

2023 Issue Paper

Golden Plough Lodge-Environmental Services Capital Plan

Purpose

The Golden Plough Lodge has in place a 10-year capital plan, ensuring capital projects are prioritized, identified, and included in Golden Plough Lodge annual operating budgets. The purpose of the capital budget is to mitigate and plan for replacement and repair of key equipment and infrastructure necessary for optimal functional until the new build is complete.

Background

The Golden Plough Lodge Environmental Services Department is responsible for ongoing maintenance and physical plant operations of our long-term care home. A key component of building management and maintenance is the development and updating capital plan which will cover priority items until the new building can be occupied. Items that are to be addressed in the 2023 budget year are as follows:

- Identified Resident Home Area windows needing brick repointing. Driving rain conditions have resulted in reported leaking in these areas.
- Replacement of McMillan Cottage and McMillan Garden Resident Home Area windows. Due to the condition of the existing windows, they can no longer be maintained for optimal resident comfort and safety.
- Plumbing in the main boiler room which controls domestic hot water and heating will need to be replaced. The existing valves which control the amount of heat required for heating and domestic hot water must be replaced to hold appropriate heating levels within the guidelines set out by the Ministry of Long-Term Care.
- The Laundry hot water system relies on 3 tanks for the delivery of hot water. Two of the tanks have reached the end of life and requires replacement.
- Several floor areas throughout the Golden Plough Lodge require resurfacing due to wear and damage over time.
- Resident beds are replaced each year as part of a renewal program, ensuring no beds are utilized over the manufacturer's recommended life span. In 2023, four resident beds meet these criteria.



- Furniture in Resident and common areas have been identified for replacement through the renewal/compliance program. In 2023 replacement of nightstands, wardrobes and common area furniture have been prioritized.
- The main domestic hot water system requires the replacement of two heat exchangers and steam valves for water temperature control.
- North Parking lot – the staff parking lot is beyond capacity to accommodate the number of staff vehicles each shift. This has caused spill-over into spaces located in the upper east lot limiting access for visitors.
- Air conditioning as required by legislation.

Financial Impact

The financial impact of the 2023 Capital Budget is \$ 245,400.

Capital Item Description	Cost
Brickwork Pointing	7,500
Window Replacement	12,500
New steam valves for hot water system	16,200
Hot Water Tanks	14,400
Flooring Replacement	14,000
Bed Replacement	13,800
Furniture Replacement	14,000
Replacement rooftop unit	15,000
Hot Water System Upgrade	18,000
Expand North parking Lot	40,000
A/C	80,000
Total	245,400

Risk Considerations

The Golden Plough Lodge is responsible for maintaining a safe and welcoming environment for all internal and external Golden Plough Lodge stakeholders. Due to the aging infrastructure of our long-term care home, repairs and replacements will continue to be necessary to avoid serious equipment failure, meet existing compliance requirements and maintain high quality standards. If Capital funding is not made available for unexpected repairs the Golden Plough Lodge could potentially see critical failure of required equipment.



Impacts to Member Municipalities/Partners

N/A

Included in 2022 Long Term Plan: YES