One Team, Shared Focus: The Senior Friendly Hospital Strategy in the NSM LHIN

Ryan Miller, Senior Friendly Hospital Strategy Coordinator, NSM LHIN
Rhonda Johnstone, Manager Healthy Aging Services, Royal Victoria Regional Health Centre
Ligaya Byrch, Planner, NSM LHIN

Supported by / Avec le soutien de

Ontario
North Simcoe Muskoka Local Health Integration Network
Réseau local d’intégration des services de santé de Simcoe Nord Muskoka
Introduction

- 5 acute care hospitals and one regional mental health centre (some organizations are multi-sited)
- Hospitals range in size from 72 beds to over 300
Seniors Population by Geographic Area
NSM LHIN (2008 data)
Background

- Ontario’s LHINs are leading a Senior Friendly Hospital Strategy – an initiative to improve seniors’ health and prevent their physical and mental decline in hospital. By acting together, hospitals can improve the experience and outcomes of older adults in Ontario hospitals.
Background

The Senior Friendly Hospital Strategy aims to:

- Improve the health, well-being and experience of seniors in Ontario hospitals, helping them get back home sooner and healthier;
- Improve seniors’ ability to live independently and stay out of hospital;
- Enhance the value of health care dollars;
- Help reduce Alternative Level of Care through supporting people to transition to the right place of care after a hospital stay; and
- Promote quality improvement initiatives that can be included in hospital Quality Improvement Plans as part of the Excellent Care For All legislation.
Why did the NSM LHIN choose to form a SFHS Task Force and hire a coordinator for one year?

- Goals
- Objectives
- Why integration and collaboration was important?
All six hospitals in the NSM LHIN completed the RGP assessment in the winter of 2011. The common themes were:

- Strong organizational and leadership support
- All hospitals have varying challenges with their physical environments
- In five of six hospitals seniors are the number one consumer
Provincial Report

- Review findings of the provincial report.
- Define key strategies at the local and LHIN level
- Prioritize strategies at the local and LHIN level
Key Strategies

- Provincial Priorities
  - Functional Decline
  - Delirium
  - Transitions
Functional Decline

- Focus on functional decline as priority area one
- 34-50% of all seniors admitted to hospital will experience a loss of functional ability for reasons other than their primary diagnosis.
- By discharge 1/3 of older patients lose independent function in one or more activities of daily living (ADL).
- Organization specific strategies
Building Capacity

- Increase local and LHIN level capacity in regard to senior friendly environments
  - Tool kit development
  - Care Connections education session
  - Code Plus Assessments
  - Promotional and educational materials for patients and families
Communication

- Ensure regular and timely communication regarding SFHS progress is disseminated to key stakeholders and others as appropriate.
  - Regular updates to Care Connections committee
  - Newsletter
  - Brochure- Patients and Family
Evaluation

- Evaluate and monitor the roll-out of the SFHS, including the development of standardized evaluation criteria.
  - Develop specific metrics framework for functional decline programming
  - Look forward to the provincial roll out of a metrics framework to help guide us further
Organization Specifics

Collingwood General and Marine Hospital
Georgian Bay General Hospital
Muskoka Algonquin Healthcare
Orillia Soldiers Memorial Hospital
Royal Victoria Regional Health Centre
Waypoint Centre for Mental Health Care
Collingwood General and Marine

- 3 D’s Screening - Surgery and ED
- Mandatory Geriatric Education for all medicine unit nurses
- Modified Hospital Elder Life Program
  - Meal Assistance
  - Activation (socialization, busy boxes)
- Patients in Motion
- Senior Friendly Advisory Council
Georgian Bay General Hospital

- Code Plus- endorsed as guide to corporate decision making
- Patients in Motion- expanded
  - Ambulation
  - Friendly Visiting
  - Orientation
- Senior Friendly Hospital Council
Muskoka Algonquin Health Centre

- Code Plus Assessment completed
- Education to Board and Senior Leaders
- GPA education for clinical staff
- Patients Information boards to include “My Mobility Plan”
- Senior Assessment Support Outreach Team
- Volunteer based activation program
<table>
<thead>
<tr>
<th>Room #</th>
<th>Rm Phone #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Today's Date</td>
<td>My Nurse is:</td>
</tr>
<tr>
<td>My Care Team</td>
<td>My Doctor is:</td>
</tr>
<tr>
<td></td>
<td>Diet</td>
</tr>
<tr>
<td>My Mobility Plan</td>
<td>Patients Ability to Transfer In-Out of Bed</td>
</tr>
<tr>
<td></td>
<td>Independent</td>
</tr>
<tr>
<td></td>
<td>Supervision</td>
</tr>
<tr>
<td></td>
<td>Assistance of 1 Person</td>
</tr>
<tr>
<td></td>
<td>Assistance of 2 People</td>
</tr>
<tr>
<td></td>
<td>Mechanical Lift</td>
</tr>
<tr>
<td></td>
<td>Other</td>
</tr>
<tr>
<td>Communication</td>
<td>Walking Aid Required</td>
</tr>
<tr>
<td>My Goals</td>
<td>Patients Ability to Walk</td>
</tr>
<tr>
<td></td>
<td>Independent</td>
</tr>
<tr>
<td></td>
<td>Supervision</td>
</tr>
<tr>
<td></td>
<td>Assistance of 1 Person</td>
</tr>
<tr>
<td></td>
<td>Assistance of 2 People</td>
</tr>
<tr>
<td></td>
<td>Non Ambulatory</td>
</tr>
<tr>
<td></td>
<td>Other</td>
</tr>
</tbody>
</table>

You will be leaving the hospital in:  
- 3 or more days  
- 2-3 days  
- 24 hours  
- ALC

PLEASE REPORT TO THE MAIN DESK UPON DISCHARGE
Orillia Soldiers Memorial Hospital

- 600 Step Campaign
- Celebrating the ‘Year of the Senior’ 2012
- Code Plus assessment
- Corporate restructuring- Senior Friendly Program
- Delirium Standard of Care
- Patient/Family education
- Resources for activation (busy boxes)
- Senior Friendly Steering Committee
Baselines of getting out of bed while in hospital

- Participate in the 600 Step Initiative
- Sit up for all your meals
- Sit up in a chair when you have visitors
- Walk around the unit either with help or if able to do so by yourself
- Do bed exercises on your own throughout the day

If you are not sure what you are safe to do, ask a member of your healthcare team.

Beige Circuit
85 steps

Red Circuit
250 steps
Royal Victoria Regional Health Centre

- 4 Geriatric Education on-line learning modules
  - Functional Decline
  - Delirium
  - Normal Aging Changes
  - Atypical presentation in older adults
- Clocks for all inpatient beds
- GPA- 2 in-house coaches trained
- GPA Education- medical geriatric unit
- Hospital Elder Life Program
  - Elder life specialist
- Next Steps- education expansion, ACE unit, senior council
Waypoint Centre for Mental Health

- Currently undergoing major expansion
- Senior Friendly Hospital Strategy informing expansion decisions and programming
- Staff education on senior sensitivity
NSM Contact Information

Collingwood General and Marine
• Anita Chevalier, Director of Performance and Quality chevaliera@cgmh.on.ca

Georgian Bay General Hospital
• Tamara Nowak Lennard, Clinical Educator Rehab and Geriatric NowakT@gbgh.on.ca

Muskoka Algonquin Health Centre
• Robert Hughes Director, Human resources & Organizational Effectiveness robert.hughes@mahc.ca

North Simcoe Muskoka LHIN
• Ryan Miller Senior Friendly Hospital Strategy Coordinator rmiller@osmh.on.ca

Orillia Soldiers Memorial Hospital
• Michelle Cook, Team Leader Senior Friendly Unit macook@osmh.on.ca

Royal Victoria Regional Health Centre
• Rhonda Johnstone, Manager Healthy Aging Services johnstoner@rvh.on.ca

Waypoint Centre for Mental Health Care
• Gail Scott, Director Geriatric Services Program gscott@waypointcentre.ca

North Simcoe Muskoka LHIN
• Ligaya Byrch, Planner Ligaya.byrch@LHINS.on.ca