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# HALDIMAND COUNTY

## Report GVL-01-2020 Grandview Lodge Quarterly Update For Consideration by Council on May 19, 2020

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### OBJECTIVE:

This report serves as a quarterly update on the operations of Grandview Lodge.

### RECOMMENDATIONS:

1. THAT Report GVL-01-2020 Grandview Lodge Quarterly Update be received.
2. AND THAT authority be delegated to the General Manager, Corporate and Social Services to receive quarterly quality reports for Grandview Lodge, provided that an annual report is presented to Council outlining the required organizational practices undertaken by Grandview Lodge for accreditation purposes.

**Prepared by:** Jennifer Jacob, Administrator, Grandview Lodge

**Respectfully submitted:** Cathy Case, General Manager of Corporate & Social Services

**Approved:** Craig Manley, MCIP, RPP, Chief Administrative Officer

### EXECUTIVE SUMMARY:

Through the Accreditation Canada Required Organizational Practices, it is required that Grandview Lodge provide, at minimum, quarterly quality reports to the governing body. This report is intended to provide background on how this practice has been met historically, satisfy the obligation for Quarter One (Q1) of 2020 and seek direction on how Council wishes to receive this information throughout the remainder of Council's term.

### BACKGROUND:

Every four years, Grandview Lodge goes through an accreditation assessment, administered by Accreditation Canada (AC). Accreditation is a voluntary evaluation and approval process for organizations or programs that deliver a specific type of services, or set of services. The focus is on the organization/program providing the service(s). Accreditation is sponsored by a non-governmental agency, in which trained external peer and expert reviewers evaluate an organization's conformance with pre-established performance standards. Although a voluntary process, the value of this review is acknowledged by the MOH through additional funding of \$16,820.00/year. Grandview currently holds the designation of Accreditation with Exemplary Standing. Throughout the four years preceding the assessment, Grandview must demonstrate how it meets the numerous Required Organizational Practices (ROP's) set out by AC and this information is used to determine if the home is compliant. There are approximately thirty (30) ROP's that must be met and for the purpose of this report, the ROP related to Accountability for Quality is specifically referenced.

The test for compliance for the Accountability for Quality ROP is measured by the following:

- The governing body is knowledgeable about quality and safety principles by providing access to education for its members;
- Quality is a standing agenda item at all regular meetings of the governing body;
- The key system-level indicators that will be used to monitor the quality performance of the organization are identified;
- At least quarterly, the quality performance of the organization is monitored and evaluated against agreed-upon goals and objectives;
- Information about the quality performance of the organization is used to make resource allocation decisions and set priorities and expectations;
- As part of their performance evaluation, senior leaders who report to the governing body, are held accountable for the quality performance of the organization.

## **ANALYSIS:**

Accreditation Canada deems Haldimand County Council as the governing body of Grandview Lodge since it is municipally operated. In the past, rather than Council receiving information reports from Grandview Lodge related to the accreditation process, Council direction was provided for these reports to be submitted to the applicable General Manager as a suitable substitute to meet the requirements of AC.

Staff are presenting this first quarterly report of 2020 pertaining to Quality of Grandview Lodge, directly to Council, to be received. The full quality report is included as Attachment #1 and is valuable information for Council and the public. Historically, Council has directed staff to provide quality reports directly to the General Manager of Corporate and Social Services to meet the Accreditation requirement, subject to Council receiving an annual update. Staff have included a recommendation to allow Council to continue this past practice.

In addition to this update report, the Leadership Team at Grandview Lodge also participates in multidisciplinary committees, resulting in several other requirements of the accreditation process being met. These include the Continuous Quality Improvement (CQI) and Professional Advisory Committees (PAC). The results of these meetings and resulting initiatives are shared in reports to Council.

These meetings have been postponed to date for 2020, due to the increased operational and management requirements of the home related to the COVID pandemic. The MOH has also advised of many deferrals to allow the long term care sector to focus on managing the home's response to the pandemic. Some of these deferrals include:

- Deadlines for reports required by the MOH, such as the home's annual Quality Improvement Plan;
- Resident Quality Inspections deferrals; and,
- Ministry Inspectors have temporarily been reassigned roles related to other pandemic related priorities.

These deferrals will impact the 2020 reports Council will see, that may have been submitted in the past on a more regular basis.

## **FINANCIAL/LEGAL IMPLICATIONS:**

Not applicable.

**STAKEHOLDER IMPACTS:**

Not applicable.

**REPORT IMPACTS:**

Agreement: No

By-law: No

Budget Amendment: No

Policy: No

**ATTACHMENTS:**

1. Grandview Lodge First Quarter Report 2020
2. Grandview Lodge First Quarter Report 2020 Appendix 1