

### Disclaimer

“Culture Change in Long Term Care” is an initiative of the Alzheimer Society designed to enhance the quality of life of people with dementia living in long term care homes in Canada and their families.

To enact this direction, the Alzheimer Society of Canada (ASC) funded an exploratory qualitative research in 6 long term care homes across Canada, which were selected by external subject matter experts on the belief that they are striving to provide elements of leading-practice, person-centred care to their residents with dementia.

ASC does not endorse or recommend any of the 6 homes which participated in this market research, nor the processes or services put into practice. The views and opinions included in the reports do not necessarily state or reflect those of ASC, and they may not be used for endorsement purposes.

Please note that the information contained in the following reports is not intended to serve as professional advice.

**Union Villa Long Term Care Home:  
The Union Mills unit for residents with Dementia  
Leading Practices in Person-Centred Care for Residents with Dementia**

Union Villa is a charitable long term care facility licensed by and operating under the authority of the Ontario Ministry of Health, Long Term Care Division. Located in Unionville, Ontario in York Region, Union Villa can accommodate 160 residents on its five home units.

Union Villa includes a 32-bed unit (**Union Mills**) specifically designed for persons with dementia, behavioral problems, cognitive impairment and benign wandering that require a secure setting.

Union Villa is one of only two such homes in Canada accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) for Person-Centred Long-Term Care Community: Dementia Care Specialty Program (Older Adults).

**A. Management Style**

**1. Active and visible champions of person-centred care**

- According to both staff and family members of residents, members of the senior leadership team of Union Villa participate in the day-to-day operations of the home, are visible on the Union Mills unit and approachable in their offices. This behaviour visibly demonstrates and reinforces commitment to person-centred care.

a) Objectives

- Create and sustain a culture of person-centred care.

b) Approach

- The senior managers of Union Villa spend as much time as possible with residents and staff of the Union Mills unit as visible champions of person-centred care:
  - Modeling appropriate behaviours.
  - Verbally reinforcing the person-centred message and principles.
  - Demonstrating a personal and organizational commitment.
  - Observing and coaching for person-centred behaviours among staff.
  - Being open to input and feedback from residents, family members, and staff.
  - Reaching out to and engaging family members.

c) Processes

- The management team *leads by example* by showing staff how residents should be treated in their home, from knocking on their doors before entering to exploring different ways to build relationships with residents and their loved ones. Through their actions, members of the senior management team demonstrate to staff appropriate person-centred behaviours.
  - “*Staff needs to see it from their leaders.*” (Registered Practical Nurse )

- Being visible to staff also allows the management team to **verbally reinforce their person-centred focus**. Staff and contracted allied health professionals consistently told us “we’re in (the residents’) home” and “it’s not our workplace as much as it’s (the residents’) home.” Hearing these messages constantly repeated communicates management’s expectations and standards of care to staff members.
  - “*We need to help our staff members to shift from a medical-model mindset to more of a community-based, resident-first mindset. We need to lead by example.*” (Director of LTC Operations)
- Members of the senior management team with nursing backgrounds also **conduct in-service and educational seminars** for nursing and allied health staff. Leading these sessions provides opportunities to demonstrate how person-centredness fits into care delivery, and reinforces to staff the commitment of the senior management team to person-centred care. The management team’s active involvement in staff education strengthens Union Villa’s culture of, and commitment to, person-centredness.
- Being on the unit allows the management team the opportunity to **observe and fine-tune staff behaviour**. On-the-spot feedback and coaching are delivered to help staff think about and explore options to deliver better and more individualized care. Members of the management team and staff referred to these situations as “teachable moments”.
- One of the challenges identified by both the senior management and nursing team of Union Villa is when frontline staff members become stuck in comfortable habits or ways of doing things. When behaviours that were once effective become entrenched, change is resisted and, worse, person-centredness becomes secondary to the needs of the person providing care. The senior and frontline managers report that observing and gently challenging how staff work with residents provides opportunities for on-the-spot coaching and development.
  - “*When people get stuck in a routine, we need to challenge them with change. We’re focused on the individual’s need, not our own comfort.*” (RPN )
  - “*As leaders, one of our jobs is to help move rigid staff and their behaviours out of the rut they’re in.*” (Director of LTC Operations)
  - “*PSWs fresh out of school tend to be task-focused, not person-focused. They want to get things done efficiently, because they’re worried they’ll get in trouble. We need to coach them.*” (Director of Care)
- Staff and family members remarked that the members of the management team have an **open door policy** and **are open-minded to suggestions and change**. From the head of the Family Council to a PSW staff member, people reported they felt very comfortable knocking on the Director of Long-Term Care’s door to present an idea or discuss a concern. Being open to and respecting the perspectives of others, for the sake of improved resident care, appears to be a standard at Union Villa.
  - “*I feel very comfortable going to all management and staff with any issue or concern I have. They are very open with me. They listen to me and do what they can to address my concerns. They try their best to accommodate me.*” (PSW)
  - Senior management also stresses to staff the value of being open to the input and feedback of residents and family members in helping improve the quality of care in the home.
    - “*Don’t defend. Listen.*” (Director of LTC Operations)

- The senior management team reaches out to *engage family members*, which helps make them feel welcome and a part of the home. This behaviour also visibly demonstrates to staff how management wants them to treat family members.
  - *“Things have changed here in the last three years. I’m made to feel more welcome. When I used to visit my husband, I felt they were thinking ‘oh, you’re here again’. Now they recognize me, say ‘hello’ and I feel like I’m part of the social circle. I’m more relaxed.” (Family member)*

## 2. Evidence-based care

- Union Villa’s senior management team promote the practice that resident care needs to be based on sound evidence that it improves quality of life, rather than based on anecdote, history or convenience. *“If it doesn’t contribute to good resident care, why are we doing it?” (Director of LTC Operations)* is the message that has percolated throughout the organization.
- a) Objectives
    - Challenge and change care practices and approaches to ensure they truly improve the quality of life for each resident — based on evidence.
  - b) Approach
    - Through informal on-the-spot staff coaching and more rigorous process reviews, the management at Union Villa challenge the way things are done in order to improve the delivery of care to residents.
  - c) Processes
    - Staff members are challenged on the job by their managers to understand what the underlying causes of a resident’s responsive behaviours might be, and explore alternative ways of mitigating them to improve their quality of life (instead of repeating tactics that are no longer as effective under the specific circumstances or given the residents’ changing behavioural patterns).
      - *“You can’t accept the behaviour of a resident at face value. You need to figure out why they are refusing to eat or have a bath.” (RPN)*
      - *“Behaviour is communication.” (Director of LTC Operations)*
      - *“Resident behaviours don’t just happen in a vacuum. Sometimes there’s a systemic issue that needs to be addressed.” (Director of LTC Operations)*
      - *“You have to ask yourself, is this only way to care for this resident?” (RPN)*
    - Staff members at Union Villa are encouraged to share and employ tips and techniques that have been successful in producing better outcomes in resident care. The specific tactics that work for each resident are recorded in the PSW Communications Book.
      - For example, recording successful attention-diversion techniques for agitated residents or delaying scheduled tasks until the resident decides to participate.
    - Formal analytic and feedback tools are developed and used by the management team to understand whether current practices and processes are achieving their desired goals, can be improved, or need to be replaced with something more effective.

- Union Villa is changing the focus of activity/recreation planning to customized programming for each resident, designed to deliver specified therapeutic outcomes.
  - To help achieve this goal, the management team has developed a comprehensive form to assess resident interest and capabilities relative to programs and activities. (*See Section D: Recreation Therapy Programming*)
  - This assessment tool has been integrated in to the electronic RAI/MDS documentation system and is being used to establish resident specific recreation/leisure plans. It is also being used to establish baseline measures of fit between residents’ capabilities and program offerings, and will be used over time to adjust programming as residents’ needs and abilities change.
- Union Villa uses regular Resident Satisfaction surveys to help measure, evaluate and evolve resident care.
  - Management found that it was the family members of Union Mills residents who were completing the survey, with no direct participation from the resident. Recognizing the feedback gap, Union Mills enlisted student volunteers to work with residents to complete the survey. (*See Section B: Management Processes*)

### 3. Innovation and flexibility

- Providing individualized care within the regulations of the Ontario Ministry of Health and Long-Term Care and the available funding envelope, requires flexibility, creativity and innovation.
  - *“We want the staff to be willing to be creative in finding solutions to improve the quality of care.” (Director of LTC Operations)*

#### a) Objectives

- Look for small innovative ways to improve individualized care to residents with dementia within current funding levels and regulations.

#### b) Approach

- Both through applying systems-thinking<sup>1</sup> at Union Mills and through one-on-one coaching, the management of Union Villa encourages and practices creativity and innovation in providing person-centred care.

#### c) Processes

- From the systems level, one way Union Villa accomplishes this is by looking at the whole organization — beyond just the Union Mills unit — to allocate resources between, and match residents’ needs to, the different units of Union Villa to maximize the quality of care. For example:
  - Adding a PSW short-shift on evenings (4:30 p.m. - 8:30 p.m.) to meet increased resident care requirements during sun-downing periods on Union Mills.

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<sup>1</sup> Systems-thinking emphasizes the relationships among a system's parts, rather than the parts themselves.

- Adding a third staff-break on the evening shift to ensure there are always two PSW staff on the unit to monitor residents and be available to provide care and support families.
- Access to clinical expertise and support was improved on the night shift through the new nursing model that included a dedicated Unit Manager (RN) role.
- Moving residents with dementia who no longer require the secure Union Mills setting (for example, due to behaviour abatement) to another unit of Union Villa to make way for someone who does.
- In terms of flexibility, when resident care needs and flow-sheet recording are completed, Personal Support Workers will spend their “free” time with their residents and their families on the unit. The residents enjoy the one-on-one attention and the PSW gets to spend time with the resident in a completely social context. It’s a “win-win” for the residents and staff, building better staff-resident-family relationships and increasing the quality of the PSW work experience and resident quality of life.
- Staff members are encouraged and coached by the management team to be creative and try new tactics with residents to reduce the environmental and other triggers of stress and agitation. The team looks for small victories every day, which they celebrate and then move on.
  - If a resident refuses to bathe at their chosen time, staff members are encouraged to respect the resident’s decision, record it on the flow sheet and try again later, using a different approach.
  - When a resident decides they do not want to eat breakfast, or history shows they prefer to sleep in, the resident choice is respected. A continental breakfast is available on the nourishment cart to ensure the resident can eat a healthy choice when they are ready.
    - *“We take cues from the resident.” (RPN)*
    - *“It’s very individualized. There are no cookie cutters in caring for residents with dementia.” (RPN)*
- Union Mills has applied innovation to programming and activities at Union Mills in a number of ways.
  - Used funds from the Ladies Auxiliary to create a multi-sensory therapy room in Union Mills to help residents relax or to help mitigate agitation and other responsive behaviours.
  - Implemented the Java Music Club, a research-based psychosocial program designed to address loneliness and depression, and build understanding and relationships among residents and between residents and staff.
  - Created for residents in Union Mills an “environment of purpose” by building three destination centres (i.e., an office, store and nursery) where residents can productively engage in once-familiar activities from their past.
  - Is investigating the integration of Montessori-based activities into the recreational programs that focus on residents’ strengths and abilities, rather than limitations.

#### **4. Staff empowerment**

##### **a) Objectives**

- Encourage staff to take come forward with and, where appropriate, take the initiative on suggestions to improve the quality of resident care and staff engagement in the home.

##### **b) Examples**

- The allied-health physiotherapist on staff came up with the idea, and is initiating, monthly theme-based educational sessions for staff and family members. This staff member:
  - Thought these sessions would be helpful given his observations about differences in staff attitudes and approaches to certain situations, like transfers.
  - Spoke to Union Villa management about this idea and gained their support for the initiative.
  - Has taken it upon himself to do all the work for these sessions, including producing posters and flyers to promote these sessions.
  - Plans to have 4 sessions per month using projectors, slides, videos and demonstrations.
  - Plans to have separate sessions for staff and family members with different objectives (staff = how, family = why) and using different presentation materials.
  - Plans to schedule the staff sessions to ensure all staff can attend regardless of their shift, e.g., session run from 11am to noon for day staff, and 3pm to 4pm for evening staff.
- This same staff member (with management's approval and encouragement) has arranged a couple of staff pot-luck dinners so that all staff members have the opportunity to know one another better and build stronger relationships.

#### **B. Management Processes**

##### **1. Process improvement**

##### **a) Objectives**

- As part of their culture of innovation and flexibility, the staff at Union Mills constantly look for opportunities to improve individualized care to residents by:
  - Streamlining processes and practices.
  - Maximizing resource utilization in delivering care.

##### **b) Examples**

- Housekeeping staff deliver bath linens to residents' rooms and do the weekly scheduled bed changes so that the Personal Support Workers can spend more time providing care to residents. Housekeeping staff also change the bed linens twice per week on the scheduled bath/shower days.
  - The next step will be point of care distribution of residents' toiletries and other supplies to each room.

- Union Villa tracks unit workload and needs against staffing levels and scheduling to ensure there's enough staff coverage at all times.
- Staff breaks are consciously scheduled to ensure only one person is off the unit at a time, to maximize coverage.
- Union Villa is currently planning a pilot-test of electronic point-of-care recording of PSW flow sheet information. Centrally located workstations will allow PSWs to efficiently enter flow sheet information electronically, saving time and eliminating the need for paper-based recording and storage.
  - Front line staff remarked that the time they spend completing flow sheet documentation removes them from interacting with residents. At the same time, staff members recognize that this documentation is necessary to record care provided and meet required documentation standards. For example, a resident's repeated refusal of offers to help her bathe should be documented in the flow sheet to indicate the decision was hers, not the staff's – an example of a resident exercising her rights, not staff neglect or ignorance of the Ontario Long-Term Care Homes Act.
  - *“Flow sheet documentation is a blessing and a curse.” (RPN)*

## **2. Recognition of personal support workers**

### a) Objectives

- Make the Personal Support Workers feel valued in their role as the primary formal caregivers to residents of Union Mills and communicate the importance of their role to residents, family members and the interdisciplinary team.
  - *“The role of a Personal Support Worker and the value it brings to a resident's care is not always understood by members of the health care team.” (Director of LTC Operations)*

### b) Approach

- The senior management at Union Villa recognizes and actively acknowledges the value of the Personal Support Worker (PSW) in their role as the home's primary formal caregivers to residents.

### c) Examples

- PSWs are encouraged to participate in educational and in-service programming to enhance their professional development.
- PSWs are included in the admission and annual resident case conferences and their perspectives and opinions are solicited in these meetings.
- Union Villa conducts a PSW-only staff meeting each month to solicit their issues and observations about how the Union Mills unit is functioning and how it and resident care can be improved.
- Union Villa is exploring the idea of creating a mentor program for PSWs. The PSW mentor is envisioned as an experienced PSW who will act as a coach/preceptor to newly hired PSWs as part of their orientation program. The new staff would have a non-supervisory point person to whom they can go for advice and feedback related to PSW care.



### **3. Performance measurement: Resident satisfaction**

- Union Villa had measured resident satisfaction in the past, but the new management team realized that no residents had completed the survey. Instead, family members were doing it for them.

#### a) Objectives

- Better understand and then take steps to improve resident satisfaction with the care received at Union Villa.

#### b) Approach

- Engage student volunteers to sit with residents with a user-friendly survey tool to complete the satisfaction measures.

#### c) Process

- With the assistance of student volunteers, 40% of the residents completed the satisfaction survey (compared to 0% in the past).
- The results indicated higher levels of satisfaction with some aspects of care at Union Villa among residents, compared to family members answering on behalf of residents.
- The feedback gave the management team evidence that they were on track in the areas where both residents and family members were aligned in their ratings.
  - The feedback also opened a window for dialogue with families about those areas where there were gaps between the residents' and families' ratings of satisfaction.
- Recently a Resident Services Program Evaluation Tool has been developed and implemented with a goal to measure resident and family satisfaction, assess the achievement of recreation programs goals and objectives and explore further areas for improvement.

### **4. Sharing resident information with staff**

- Helping staff remember and utilize information about each resident is an important ingredient in person-centred care.

#### a) Objectives

- Learn as much as possible about each resident to transform them from a patient to a person who is known well by all staff.
- Help staff members use information about each resident to improve the quality of their life at Union Mills.

#### b) Approach

- Create tools that are readily accessible to staff and that capture key information about residents.

c) Examples

- Union Villa is implementing Care Plan “cheat sheets” or a point-form summarized care plan that will be posted inside each resident’s closet door. The summarized care plan will help new or fill-in staff members get quickly up-to-speed on the needs, likes and dislikes, and sensitivities of each resident.
- Union Villa is also implementing “My Story” boards, which will communicate the key information about each resident’s background and relationships. (**See Appendix A**)
  - These boards will display important aspects of residents’ lives, including familial relationships and friends, career, hobbies and sports, pets and other information.
  - They will be posted on residents’ walls, giving staff cues for relationship and trust-building communications.
  - The boards will communicate to residents and family members a powerful sense of the caring and the importance of personhood at Union Mills.

**C. Initial Intake and Care Planning**

**1. Resident-information gathering and dissemination**

- The Ontario Long-Term Care Homes Act, 2007 defines what should be part of the assessment and care plan for residents, from cognitive and physical abilities to psychosocial well-being and spiritual/religious preferences. Union Villa has expanded on the prescribed list of items to deepen the understanding of, and care planning for, residents.

a) Objectives

- Develop a deep understanding of each resident in order to develop a robust plan to maximize their quality of life in their new home.
- Disseminate the information to members of the care team so they can apply the knowledge to improve the quality of residents’ lives.

b) Approach

- Union Villa has developed or is currently in the process of developing three new sections for its resident-information gathering process. The new assessments will be based on discussions with the family members of new residents and the residents themselves, appropriate to their level of cognitive capability.

c) Processes

- As part of the information gathering, Union Villa recognizes that residents might have been, and could still be, sexually active. The team is unwilling to assume residents’ sexual orientation or needs.
  - A sexual history and needs assessment is being developed to complete the picture of residents and help the team plan for their sexual needs and behaviours in their new home.

- A “bucket list” is a list of activities an individual would like to accomplish before their life comes to an end. Included in the resident-information gathering is discussing with residents and their family members what the resident would like to accomplish over their stay at Union Villa.
  - In talking to residents and/or their families, it became apparent that some residents had unfulfilled dreams that could possibly be achieved with the help of Union Villa staff and its volunteers.
- For most residents, Union Villa will be their final home. The Union Villa team are currently building into their resident-information gathering tools for discussing, with residents and their family members, the resident’s wishes regarding end-of-life care and arrangements (for example: presence or absence of spiritual/religious rites, music, visitors, advanced directives, funeral arrangements if any, etc.)
- A one-page summary of each resident’s Union Villa assessment is emailed to frontline staff and contracted allied health providers before they meet the resident for the first time to help them become familiar with the resident and prepare to engage with them. (**See Appendix B**)
  - The one-page summary also serves as an announcement welcoming the new resident to Union Villa so that current residents are prepared for their arrival and know a little about them. This helps make the arrival of the new resident a more welcoming experience. The welcoming announcement is posted inside Union Villa.

## 2. Care planning and delivery

### a) Objectives

- Continually aligning residents’ care plans to their changing capabilities and needs.

### b) Approach

- Engage Union Mills management and Union Mills frontline staff in discussing resident care plans vis-à-vis residents’ capabilities, and making any necessary changes.

### c) Processes

- In the weekly Care Practice Meetings, the team (RN, RPN and PSWs):
  - Makes changes to the care plans.
  - Discusses which staff and tactics work best with which residents.
  - Amends resident-staff assignments to reflect “best fit” and scheduling.
- Case studies and debriefs are scheduled in response to specific incidents to discuss how the situations were handled, how they could have been dealt with better, and what needs to change in the future to prevent them.

## D. Recreation Therapy – Programs & Activities

### 1. Assessing the fit between residents' capabilities and recreational programming

- Residents' care plans call for recreational activity plans, but the senior management team at Union Villa had no evidence that the recreational activities in place actually matched the needs or capabilities of individual Union Mills residents.
  - *"We didn't have a measure of whether the activities we were providing were actually meeting the needs of residents or were based on just what we thought was best."* (Director of LTC Operations)

#### a) Objective

- Match individual resident's capabilities and needs to recreational therapy/activity programming to achieve specified therapeutic outcomes.

#### b) Approach

- Both initially and on an ongoing basis:
  - Assess each resident's needs and abilities for programming.
  - Set specific therapeutic outcome objectives for each resident, based on their assessed needs and abilities.
  - Develop a customized programming plan for each resident designed to accomplish the specified therapeutic outcomes.

#### c) Process

- The team at Union Villa has created an extensive resident recreation/activity assessment tool that allows residents' interests, needs and capabilities to be matched against appropriate and effective recreational programs and activities. (See **Appendix C**)
  - Union Villa's RAI/MDS/Informatics nurse and the recreation staff worked together to build this assessment tool into the home's electronic documentation system.
  - This tool is being incorporated into the initial intake process.
- A baseline recreational therapy/activity assessment of all residents was conducted, using the new tool, through resident and family member interviews, and with frontline staff input. The assessment explores and logs residents' likes and dislikes, vis-à-vis various dimensions of activities, and their capabilities across various domains (e.g., mobility, mood, cognitive ability, sociability and awareness).
- Union Villa is in the process of assessing current and planned recreational programs against residents' baselines for "best fit", so that the activities residents participate in better match their capabilities and preferences. This will result in individualized recreation plans.
- In the future, Union Villa will re-assess residents and their individualized recreation plans as the residents' abilities change.

## **E. Staff Education and Training**

- Finding the money to invest in staff development is a challenge in the long-term care sector and Union Villa is no exception. Yet Union Villa manages to build staff development, education and learning into its operations and culture.

### a) Objectives

- Encourage and provide opportunities for staff development, education and training.

### b) Approach

- The senior management team:
  - Conducts in-service and training programs for staff.
  - Leverages and shares with staff the knowledge and experience of other long-term care homes in the area.
  - Is open to and utilizes vendor education and training programs.

### c) Processes

- The Union Villa senior management team takes advantage of any relevant educational or in-service program opportunities provided without charge from external contracted suppliers.
  - The physiotherapist and dietician, both external suppliers, conduct in-service education programs for staff members when they identify a need (e.g., on the importance of, and tactics related to, resident nutritional intake; falls prevention; behaviour management).
- As mentioned before, the senior management team – CEO, Director of Long Term Care Operations and Director of Nursing and Personal Care – all conduct in-service education programs for staff.
- New nursing and PSW staff members to the Union Mills unit are required to be trained in P.I.E.C.E.S., U-First!, and Gentle Persuasive Approach.
  - When the attendance of the staff at in-service sessions was low, the senior management team investigated and, based on the findings, changed both the mode of delivery and scheduling of the sessions to make them convenient for staff (i.e. multimedia delivery scheduled at different times/locations).
- Union Villa is also a member of the Alliance of Long-Term Care Homes in the area.
  - Management staff from these homes meet every two months to share ideas, practices and programs, and also to discuss implementation issues related to ministry guidelines.
  - As well, the CEOs/Administrators meet as a group to share sector issues and opportunities.
  - The Alliance organizes and puts on education and training programs to benefit its members and their staff based on suggestions from its members. The cost for this training is significantly lower than could be realized in an individual home setting.

- Alliance members also use their network to communicate regularly with their peers to ask questions and share information on various subjects, e.g., policies and procedures, practices, training, etc.

## **F. Staff Scheduling**

- The Union Villa management team recognizes that continuity of care and strong relationships between residents and their staff caregivers are important factors in good person-centred care and resident well-being.
- a) Objectives
- As much as possible, encourage the development of strong continuous relationships between residents and members of the care team at Union Villa.
- b) Approach
- Each PSW in the Union Mills unit is assigned as the primary caregiver to 8 residents who live there. Of any staff that interacts with residents, the primary caretaker will spend the most time and develop the strongest relationship with their residents.
  - Assign a secondary PSW caregiver per 8 residents. The secondary caretaker is daily visible to, and interacts with, the primary caretaker's residents. They become familiar enough to the primary's residents to be able to cover for the primary, if necessary.
  - To the extent possible, Union Mills attempts to assign PSWs to residents on the basis of the quality of their relationship and the PSW's effectiveness in engaging the resident.
    - *“One staff person in particular really knows my husband and has a relationship with him. When he's in a good mood, happy and laughing, I know who's been working with him.” (Family member)*
  - Primary and secondary caregiver PSWs work in pairs doing the routine daily tasks (e.g., providing personal hygiene services) to:
    - Build bonds with their residents,
    - Get to know the residents in each other's care,
    - Support each other in resident care,
    - Mentor and monitor each other, and
    - Learn and share tactics that are effective.

## **G. Family Engagement**

- a) Objectives
- Make family members feel welcome at Union Villa.
  - Ensure that family members' needs are being listened to and addressed in a person-centred way.

b) Approach

- Through informal and planned opportunities, and through the home's Family Council.

c) Processes

- Informal processes.
  - Family members report that the senior management team and staff members make them feel welcome at Union Villa, genuinely seem to care about them and any issues they may have, and solicit their input on opportunities and planned changes at the Home.
    - Family members were recently asked for their opinions on paint colours for the Union Mills renovation.
    - When a family member pointed out that the carpeted floors in residents' rooms absorbed and sometimes smelled of urine, the management team included replacing the broadloom, with more easily-maintained tiles, in the renovation plans.
    - *"They are concerned about me. They say I need to take care of myself and that I should take holidays."* (Family member)
    - *"There's always someone there to answer my questions, right away, staff or managers. They're all extremely approachable."* (Family member)
- Family member education.
  - Union Villa conducts educational sessions for family members who want to take their resident home for short stays (like Christmas). These sessions focus on things like transferring the resident into and out of their vehicle and providing care and safety in their home.
  - Staff report that there is sometimes tension between the wishes of residents and those of family members. For example, a visiting spouse may become upset that her husband hasn't been shaved. Family members sometimes need a gentle reminder, or more formal education, about the importance of staff respecting the wishes of residents.
- Family Council.
  - While the Ontario Long-Term Care Homes Act encourages the formation of Family Councils, the President of the Council of Union Villa was particularly vocal about how approachable and open the management of Union Villa is to feedback. The Family Council is made up mostly of family members of current residents of Union Mills.
    - Union Villa has a very active Family Council and their concerns and input are welcomed by the senior management team. If not acted on, the Family Council reports they are provided with an explanation as to why the change could not be implemented.
    - Recent Family Council initiatives that have been adopted include:
      - Posting on the wall across from the nursing station at Union Mills, the names and roles of those working on the unit so that family members know which staff members are working on any particular shift.
      - Posting on the same wall, a two-week schedule of staffing for all three shifts so residents and family members know well in advance who will be (or was) caring for residents.

- Creating nametags for staff members that are colour-coded to indicate their role (RN, RPN and PSW) so family members can identify staff and their role.
- *“Thank you for giving us your time, especially after a full day’s work. Your input and help with our concerns only confirms we are partners in our mission to provide a safe and caring environment for our loved ones. We do realize the heavy responsibility you have with the ever-increasing demand on [Union Villa’s] resources and capacity. All the more reason we are grateful that you listen, provide education and help make positive changes for our loved ones.” (Note to the CEO, recorded in the Family Council meeting minutes of March 12, 2012.)*

## H. Community Engagement

- Union Villa was born as a project to celebrate the nation’s 100<sup>th</sup> birthday and fulfill a need in the community for housing for the elderly. Community support continues to be a powerful force at Union Villa that enhances the quality of care for residents through:
    - Financial support for capital and other projects.
    - Volunteers to help in the delivery of care.
- a) Objectives
- Build community awareness and financial support of, and active engagement in, the good work that Union Villa is accomplishing on behalf of its residents.
- b) Approach
- **Volunteers:** Union Villa actively markets and recruits for volunteers to assist in the home and enhance their own personal development. The home has a volunteer coordinator who is responsible for screening and training. The circa 300 volunteers serve on all units of Union Villa, including Union Mills, interacting with residents, helping to relieve staff, and accompanying residents on field trips outside the home.
  - **Student placements** from high schools, colleges and universities: Union Villa accepts student coop and professional study placements (e.g., social work, nursing, and psychology). Students are engaged in special projects or academic practicum activities.
  - **Ladies’ Auxiliary:** The very active Ladies’ Auxiliary at Union Villa creates crafts and events to raise funds for the home, which are used to improve resident care and quality of life.
  - **Foundation:** The Unionville Home Society Foundation raises funds through its annual gala and by soliciting donations from corporations and individuals. The funds are used for capital projects, such as replacing residents’ beds and facility upgrades and renovations
  - **Markham Women’s Group:** This group holds an annual “ladies only” fall fashion show that raises money specifically for long term care homes. Union Mills has benefited each year from the donations received.



## Appendix A: My Story

# Paul Cockburn

*Paul was born to Margaret and William Cockburn on July 20<sup>th</sup>, 1933. He was born and raised in the east end of Toronto and is the youngest of 4 boys.*

*Paul has been married to his wife Eileen for over 50 years. Together they have 4 children; 3 boys and 1 girl. They have also been blessed with 8 grand children.*

*Paul has a Bachelors and a Masters degree in Applied Science from the University of Toronto. He is a registered civil engineer. Paul's career took him many places, the most memorable being Saudi Arabia. Paul, his wife and 2 youngest sons lived in Saudi Arabia for 2 years. After living and working in Saudi Arabia, Paul came back to Toronto and worked in consulting for a private company in East York.*

*Paul also had his own company for 5-6 years. As a civil engineer, Paul built and worked with sewers and water mains, sewage treatment plants and water reservoirs.*

*One of Paul's greatest accomplishments was organizing a men's golfing trip to Freeport, Bahamas for 27 consecutive years. This trip had anywhere from 24-48 men per year. They were called the "Cockburn Golf Group" and were even featured in the newspaper.*



*The Cockburn family's favourite tradition is to get together every year at Thanksgiving at their family cottage just outside Gravenhurst in Muskoka, Ontario.*

*They enjoy a traditional full turkey dinner. Occasionally they enjoy 2 turkeys; 1 being oven roasted and the other deep fried. Their cottage is situated on picturesque Sunset Bay; a small bay on the larger Lake Muskoka.*



## Appendix B: Resident Welcome Letter



Please welcome Gladys C to Union Villa – room (specify) on (specify home unit). Here is some information about our new resident that will be helpful as we support Mrs. C and her family in their transition to LTC at Union Villa.

- Gladys is an 81 year old woman who is being admitted from her home in Markham where she has been living with her husband Ronald.
- She prefers to be called by her first name Gladys
- Gladys was born in Winnipeg to a family of four sisters. Her mother died when she was three years old and she was raised by her older sister. She has one remaining sister Joyce who lives in Winnipeg.
- Gladys is proud to be an Icelandic Canadian as her parents were from Iceland.
- After finishing high school, Gladys held a number of clerical and reception jobs.
- She married Ronald in 1955 and they moved to Montreal and relocated to Markham.
- Gladys has four children, two sons Jim and Leonard, two daughters Christine and Karen and six grandchildren. All of her children live in the GTA.
- She is Roman Catholic and may be interested in attending religious services.
- Gladys has been attending the UHS day program and it has been very successful for her.
- She is a social person who has a good sense of humour and likes to joke with others.
- Her mood in accepting care varies from being resistive and argumentative to cooperative and agreeable.
- Gladys was a bridge player and enjoyed card games, and board games such as yatzee.
- Her hearing is excellent and as far as her vision, she has dry macular degeneration.
- Gladys ambulates using a cane and has had recent falls. She wears a heel lift in her shoe following two left hip replacement surgeries. Her family would like to have her accessed for a walker.
- She was diagnosed with dementia three years ago and has been assessed as incapable to make care decisions.
- Gladys's appetite has been described as sparse. She enjoys soups, small portions and needs to be coaxed to eat. She has a larger appetite in the morning and enjoys sweets. Her family have been giving her boost supplements
- She has no known allergies.

*Marifyn*

## Appendix C: Activity/Recreational Therapy Assessment

(Two left mouse clicks to open document below. Requires Abode Reader™.)

### Indicate Perceived barriers to participation

- a.  Language
- b.  Physically weak
- c.  Inappropriate behaviours
- d.  Vision
- e.  Literacy
- f.  Lack of Confidence
- g.  Length of time to sit
- h.  Lack of motivation
- i.  Pain
- j.  Confusion
- k.  Religious Beliefs
- l.  No support from family/friends
- m.  Attitude
- n.  Mobility
- o.  Ability to concentrate
- p.  Hearing
- q.  Money
- r.  Other

### Skills Evaluation

- a. What are your greatest strengths?

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- b. What do people like about you?

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### 8. Communication

#### Vision

- a.  Wears glasses
- b.  Able to read Small print books
- c.  Able to read Large print books