

Evidence of Philip Moorman

Long-Term Care Homes Quality Inspection Program Performance Assessment (LPA)

July/Aug 2018

Context

Key Facts

- Initially known as the Long-Term Care Home Quality Inspection Program Risk and Performance Assessment Report (LRPA)

- Developed in 2011/2012 as an internal resource to:
 - Identify/monitor issues in LTC homes that may pose serious risk to resident care;
 - Assist in the allocation of ministry inspection resources to identified homes accordingly

- First report was produced November 2013; published quarterly since then
 - Reports have improved over time – now on Version 5

- Performance results have been made public, as of April 2018

How the LPA is used

Informs and supports LTC Inspections Branch risk management approach:

- ✓ Assists Service Area Offices (SAOs) in prioritizing and scheduling inspections, especially Resident Quality Inspections (RQI) and the allocation of staff resources
- ✓ Supports evaluation of strategies to respond to LTC homes that demonstrate repeat and multiple non-compliance (e.g., enforcement strategies, operational meetings with Licensees)
- ✓ Provides decision support for the ministry in the roll out of new programs to LTC homes
- ✓ Enables development of customized risk reports for LTC Homes; i.e.: LTC home chains

Criteria for Selecting Data Elements

In selecting data elements to assess risk to resident care, potential data elements were judged against the following criteria:

- **Specific** → Concisely represent an area of risk
- **Reliable** → Data can be consistently and accurately collected
- **Valid** → Poor performance on indicators is correlated with an actual or potential threat to resident care
- **Accessible** → Is available to LTC Inspections Branch

Data Element #1

Compliance/Inspection Data (raw numbers converted to percentiles)

- Number of inspections
- Number of findings of non-compliance
- Number of inspector-issued orders
- Number of complaints leading to findings of non-compliance
- Number of critical incidents (CIs) leading to findings of non-compliance

Data Period

- ❖ November 2013 to March of 2016 – period =12 months
- ❖ March 2016 to present – period = 18 months

Data Element #2

RAI-MDS Data

- Incidents of worsening pressure ulcers
- Incidents of worsening pain
- Incidents of worsening resident behaviour

RAI-MDS data is submitted by LTC homes to Canadian Institute for Health Information (CIHI) and is available to MOHLTC

Data Period

- ❖ Quarterly (i.e. 3 months)

Data Element #3

Long-Term Care Home Service Accountability Agreement (L-SAA) Report

- Reports Compliance Indicator Status of the home as either substantially compliant in high risk areas or chronically non-compliant in one or more high risk areas by looking at compliance history
- A home that has two consecutive orders in any of the any of the high risk indicator areas is deemed to be chronically non-compliant.
- High risk indicators:
 - Injury that results in transfer or admission to hospital
 - Medication incidents
 - Missing resident
 - Environmental hazards
 - Infection Control
 - Alleged/actual abuse/assault
 - Pressure ulcers
 - Presence of daily physical restraints
 - Weight loss management
 - Continence care and bowel management
 - Falls
 - Behavioural symptoms affecting others

Data Period

❖ 36 months

Data Element #4

Qualitative data

- High leadership turnover (Administrator, DOC)
- Financial challenges (i.e. information from creditors, banks, risk of receivership)
- Reports from other governmental bodies (i.e. Office of the Fire Marshal, Ministry of Labour, Electrical Safety Authority)
- Issuance of Director Orders
- Issuance of Mandatory Management Order
- Director Referrals

Data Period

- ❖ Approximately last 3 months of current relevant information

Risk Levels

LRPA (Nov 2013 to Dec 2017)

- **Level 1:** Compliant or Substantially Compliant
- **Level 2:** Non-compliant / moderate risk
- **Level 3:** Non-compliant / high risk
 - Category 1
 - Category 2
- **Level 4:** Revocation of Licence

LPA (Dec 2017 to Present)

- **Level 1:** In Good Standing
- **Level 2:** Improvement Required
- **Level 3:** Significant Improvement Required
- **Level 4:** License revoked

Level 1 – Substantially Compliant

LTC Home

Possible ministry actions

Criteria for level one

- Overall score below the 70th percentile
- LSAA report: not chronically non-compliant
- Qualitative data: no significant concerns

- ***Standard inspection processes in place***
- ***RQI - Risk-Focused***

Level 2 – Non-Compliant /Moderate Risk

LTC Home

Criteria for level two homes

- ❑ Overall score in 70th to 85th percentile
- ❑ LSAA report: not chronically non-compliant
- ❑ Qualitative data: moderate concerns (i.e. Fire Marshal, Financial solvency)

Possible Ministry actions

- Additional focus and follow-up through existing and enhanced enforcement mechanisms:
 - Frequent inspections and follow-ups on Orders
 - SAO Initiated Inspection to determine if additional areas of risk are evident in LTC Home or ministry initiates an RQI earlier in the year
- Meeting arranged by SAO Manager/Senior Manager with the Licensee to discuss Ministry concerns re: compliance and Licensee's proposed response
- Meeting arranged by Ministry with LHIN
- Director Order
- ***RQI - Intensive Risk-Focused***

Level 3 – Non-Compliant /High Risk

LTC Home (Category 1)

Criteria for level three homes

- LSAA report: not chronic non-compliance
- Overall score 85th percentile or higher

OR

- Overall below 85th percentile
- LSAA report: chronic non-compliance
- Qualitative data: significant concerns (i.e. Fire Marshal, Financial solvency)

LTC home will move to Category 2 if:

- Non-compliance with Director Orders to do operational review to develop improvements to achieve and sustain compliance with Orders in high risk areas
- Licensee demonstrates through continued non-compliance that they are unable/unwilling to comply with Inspector and Directors Orders

NOTE: As of December 2017, categories 1 and 2 combined

Possible Ministry actions

- Internal meeting with Director/SAO and Licensee to discuss compliance issues with Licensee
- LHIN Performance Discussion with Licensee (may be combined with MOHLTC meeting with licensee)
- Director's Orders issued unless homes moves voluntarily to resolve the issues by conducting their own operational review

Additional actions for category 2 homes

- Require home to submit a plan to the Director to achieve compliance by Management Company or consultant; and to implement that plan
- Management company and/or consulting assistance through the issuance of a Director's Mandatory Management Order in accordance with LTCHA

Level 4: Revocation

- Issue Revocation Order where grounds exist in accordance with LTCHA
- Issue Order for Interim Manager to be put in place while residents are re-located and home is closed in accordance with LTCHA
- Director / SAO Manager meet with Residents/Families and Staff
- Conduct Inspections to monitor care and services, as required

Improvements to the LPA

