



Scarborough Health Network's Final Report on the Management of Altamont Care Community

Introduction

The long-term care (LTC) sector recently experienced challenges in managing outbreaks related to the COVID-19 pandemic. A report published in the Canadian Medical Association Journal stated that 30 per cent of LTC homes in Ontario experienced outbreaks during the peak periods of the pandemic (March 29 to May 20, 2020), with approximately 80 per cent of Canadian COVID-19 related deaths happening in a LTC setting¹. Limited Infection Prevention and Control (IPAC) expertise, antiquated facilities with four bed rooms, and constrained human resources for staffing were significant factors that propagated the spread of COVID-19 and created the challenges that the virus presented to LTC homes in Ontario.

Due to the evolving need for better communication and a locally coordinated effort for pandemic management among LTC homes, Scarborough Health Network (SHN) created the Long-Term Care Home Incident Management System (LTCH IMS). The LTCH IMS, which included 19 LTC homes across Scarborough, met weekly to monitor the situation and provide resources to support LTC homes that entered outbreak. Members from the Ministry of Long-Term Care (MLTC), Toronto Public Health, and Ontario Health East were invited to this table to participate in the regular meetings which included review of best practices for IPAC, environmental services (EVS) and included monitoring of LTC homes for outbreak on a weekly basis.

The Challenges at Altamont Care Community

In response to the COVID-19 crisis and outbreak that was taking place at Altamont Care Community (ACC), SHN entered into a Voluntary Management Contract on June 3, 2020 at the request of the MLTC. A report from the Canadian Armed Forces (CAF) which was released publicly contained a snapshot of what was found upon the entry of the CAF at Altamont. This contract was built on a foundational commitment to serve and support the residents, their families, and the staff. Utilizing a collaborative methodology, SHN's ultimate purpose was the restoration of confidence of the residents and their families, their staff, the Scarborough Community, the MLTC and Ontario Health East that the care provided at ACC was an exemplar of how excellent resident care can be provided.

A comprehensive framework was developed that included a current state situational analysis, formulation of key recommendations, and initiation of sustainable action plans with associated accountabilities, monitoring, and escalation processes.

SHN delivered 32 recommendations in a Preliminary Report to which Altamont Care Community developed a sustainable Action Plan with key deliverables. These 32 recommendations comprised the Implementation and Sustainability Plan for ACC. A core team of leaders and subject matter experts from SHN were dispatched to ACC and many were on site daily to work alongside the Altamont Care Community team to share best

¹ Rankin, C. (2020, July 23). Out of date design of long-term care homes left residents more vulnerable to COVID-19: Study | CBC News. <https://www.cbc.ca/news/canada/hamilton/long-term-care-home-for-profit-1.5658803>

practices, develop and implement new processes, provide training, direct service support and ultimately, engage staff, residents and families in changing a culture that would promote and support a safe environment.

The Outbreak Ends

Toronto Public Health declared the COVID-19 outbreak over in the home on June 11, 2020. SHN and Altamont Care Community continued to work together with a relentless focus on infection prevention and control (IPAC). On-site support was provided to the frontline staff through team huddles, planning and executing on change actions, observing and coaching staff and leaders, reviewing performance, and debriefing on change outcomes.

A Collaborative Partnership is Created

'Report Out' sessions were hosted daily initially and then frequently with Altamont Care Community and SHN leaders to recognize accomplishments, progress on actions, and as well to articulate upcoming plans to ensure transparency and accountability through the journey.

Scorecard performance indicators and progress reports on the Action Plan were monitored in weekly meetings between Altamont Care Community and SHN leaders to support accountabilities, identify barriers and enable progress in managing change. Furthermore, town halls, newsletters and other communication efforts were introduced with staff, residents and their families to share progress as well as receive questions and feedback on changes. SHN also supported the home in developing a corrective action plans in response to the *Compliance Orders* issued by the MLTC.

Through this collaborative partnership, Altamont Care Community established a path of recovery that re-introduced congregate dining, family visiting, resident programming, and other services to support new and safe processes that were fundamental to resuming normal resident activities as the pandemic continues.

This final report outlines the 32 recommendations provided to Sienna Senior Living, the parent organization of ACC along with the rationale, corresponding Action Plan from Altamont Care Community, and the status of its implementation. These recommendations are the component recommendations for the Implementation and Sustainability Plan for ACC.

Status of Recommendations

	Recommendation	Rationale	Action Plan	Current Status
Leadership	1. Sienna Senior Living Inc. should consider adding a health care professional to its Board of Directors.	A health care professional can offer insight on the complexities of the health care sector and related processes.	<ul style="list-style-type: none"> Sienna Senior Living is assessing the organization's leadership structure Joseph Mapa (former President & CEO of Sinai Health Systems) has joined Sienna as a Special Advisor to the Board 	Complete
	2. Sienna Senior Living Inc. should develop and implement a Leadership Strategy aligned with an evidenced-based capability framework, e.g., the LEADS in a Caring Environment Capability Framework, which includes onboarding, opportunities for leadership skill practice, individual development planning, mentoring/coaching, and a formal and objective annual performance review process.	An opportunity to strengthen leadership and accountabilities for effective management of any future outbreaks was identified.	<ul style="list-style-type: none"> A leadership assessment will be conducted, reviewing leadership accountabilities and goals, implementing a performance review program, and reviewing Sienna Senior Living's leadership commitments 	Complete
	3. In recruiting its next generation of leaders, Altamont should intentionally recruit leaders with bona fide leadership experience in health care and a demonstrated skill set to work and seek collaboration in an integrated health care system. SHN looks forward to this collaboration.	LTC is a home for its residents. A potentially lethal infection like COVID-19 requires added medical competencies in a LTC home. An experienced health care leader will assist a LTC home in managing a future outbreak.	<ul style="list-style-type: none"> A permanent Executive Director has been hired A leadership contingency model will be implemented, in anticipation of future pandemic waves A succession plan including planning for the introduction of New Pathways to Leadership Program will be developed 	In progress

Infection Control and Prevention (IPAC)	4. The Board of Directors of Sienna Senior Living Inc. should read and be familiar with the Public Health Ontario guidance document, <i>Prevention and Management of COVID-19 in Long-Term Care and Retirement Homes, June 2020</i> .	Understanding Public Health guidance will ensure that decisions are informed by, and align with best practices.	<ul style="list-style-type: none"> The guidance document will be provided to each board member, President and CEO, and the Senior Leadership Team of Sienna Senior Living and the Leadership Team of Altamont 	Complete
	5. The President and Senior Leadership Team of Sienna Senior Living Inc. and the Leadership Team of Altamont should read and be familiar with the Public Health Ontario guidance document <i>Prevention and Management of COVID-19 in Long-Term Care and Retirement Homes, June 2020</i> .			
	6. Altamont should complete an IPAC organizational risk assessment immediately, and in August each year for the coming influenza season.	Conducting a risk assessment will provide the organization and its regional partners with areas of strengths and opportunities in managing future outbreaks.	<ul style="list-style-type: none"> ACC will conduct an organizational risk assessment, which will include vaccination rates, planned vaccination clinics, prevention and safety education, and mitigation of influenza risk 	Complete
	7. Altamont should establish a cohorting bed management plan with clear personal protective equipment (PPE) expectations, staffing assignments, resident and family communication, proper signage and staff engagement.	Clear bed plan expectations are required to support a safe care delivery model when a LTC home is in outbreak.	<ul style="list-style-type: none"> A bed management plan, along with related communication processes, appropriate signage, and auditing processes will be implemented 	Complete
	8. Altamont should establish clear resident prevalence screening processes when in outbreak, including timelines consistent with Public Health and Ontario Health guidance documents. This should include reporting and escalation processes and communication plans.	Resident screening processes must align with guidance documents.	<ul style="list-style-type: none"> A process for infection control surveillance will be implemented for residents and staff including education, documentation, monitoring, escalation, and follow-up testing IPAC lead accountabilities will be reviewed including outbreak management, testing, reporting and escalation 	Complete
	9. Altamont should dedicate a full-time IPAC specialist duly trained and certified in IPAC Canada-endorsed courses. This education should include IPAC Canada's: <ul style="list-style-type: none"> Novice Infection Prevention and Control Course; and Basic Infection Prevention and Control Program at Centennial College in Toronto or Queen's University in Kingston. This could ultimately lead to Certification in Infection Control (CIC).	IPAC capacity and resources for outbreak management should align with best practices integrated within the home. Good IPAC practices are paramount to ensuring rapid and effective control of an outbreak.	<ul style="list-style-type: none"> ACC will ensure dedicated IPAC resource time ACC's IPAC lead will be enrolled in recommended programs with successful completion required 	Complete
	10. To enhance educational opportunities for training and mentorship, SHN will provide a period of arranged internship for the Altamont IPAC specialist with SHN's IPAC and infectious disease teams in our Scarborough hospitals.	Enhanced IPAC knowledge is required in preventing or mitigating any future outbreaks.	<ul style="list-style-type: none"> IPAC mentorship support will be coordinated with SHN 	Complete
	11. Altamont's dedicated IPAC specialist should, during outbreaks, connect with Sienna Senior Living Inc.'s IPAC consultant on a weekly basis for advice, and for the provision of educational, coaching and training materials for Altamont staff.	IPAC capacity and escalation for consultation support is required to ensure best practices and decisions are initiated as required in preventing or mitigating any future outbreaks.	<ul style="list-style-type: none"> ACC will begin weekly 1:1 coaching sessions with the corporate Infection Control Officer to establish a cadence of sessions. 	Complete
	12. Altamont's IPAC specialist should identify and train staff champions amongst frontline staff, ensure staff compliance with IPAC best practices, conduct education for staff including safety huddles, and perform PPE, hand hygiene, and screening compliance audits.	The need for broader staff IPAC capacity to support daily practices was identified.	<ul style="list-style-type: none"> ACC will develop and implement an IPAC champion model 	Complete
Support Services	13. The environmental services (EVS) team at Altamont, whether direct employees or via third party should require all its members to review the <i>Best Practices for Environmental Cleaning for Prevention and Control of Infections in All Health Care Settings, 3rd Edition, April 2018</i> .	Prior to SHN intervention, practices related to environmental cleaning were not optimal.	<ul style="list-style-type: none"> ACC will deploy an education module (including audits) for all EVS team members focused on the <i>Best Practices for Environmental Cleaning for Prevention and Control of Infections in All Health Care Settings, 3rd Edition, April 2018</i> 	Complete
	14. The Altamont EVS team should: <ul style="list-style-type: none"> Have regular quarterly meetings with SHN EVS professionals to review policies, procedures and best practices related to cleaning; Build a standard work portfolio and ensure all cleaning staff are trained on the performance of this standard work, using these standard work routines for occupied rooms, terminal cleans, 30-day cleans, and isolation cleaning; Develop a robust auditing program including visual audits, observation audits, and environmental marking audits for quality; Remove all clutter in hallways and fabric-containing furniture, and develop new standards for purchasing furniture to reflect the need for ease of cleaning during outbreak; 	Opportunities to enhance environmental services and selection of cleaning agents exist. As this portfolio's function is critical for infectious disease eradication and containment, it is important to ensure standard work is in place and audits are in place to measure compliance.	<ul style="list-style-type: none"> ACC will schedule quarterly meetings with SHN, establish weekly audit processes, track staff education and ensure that best practices are being utilized ACC will review its disinfectant usage 	Complete

	<ul style="list-style-type: none"> Revise its disinfectant program to include a disinfectant with a five-minute kill time or less, which all housekeeping staff can apply; Use daily staff huddles to plan for necessary daily work, share information, and reinforce best practices; and Ensure that there are both dedicated clean and soiled utility storage rooms on site. 			
	15. Altamont should develop an internal tracking system to ensure that inventories of PPE on hand are counted and clear triggers exist to escalate where shortages appear imminent.	Inventory management is important to ensure this resource is monitored and accessed appropriately. Staff need to know that access to PPE will not be curtailed due to lack of availability.	<ul style="list-style-type: none"> ACC will identify a storage solution, and establish PPE management processes 	Complete
	16. Altamont should ensure the kitchen is commercially cleaned for pest control (ants), and all equipment should undergo deep cleaning.	During SHN's intervention, a pest infestation in the kitchen was identified.	<ul style="list-style-type: none"> ACC will establish contracts for monthly deep cleans and weekly pest surveillance 	Complete
Human Resources Management & Workplace Health and Safety	17. Altamont should: <ul style="list-style-type: none"> Develop, implement, and evaluate a staff wellness strategy that is based on best practices including the National Standard for Psychological Health and Safety; Prioritize staff engagement activities as a foundational driver for the delivery of quality care ("The Quadruple Aim") including shared decision-making models, scheduled communication huddles, performance monitoring boards, and recognition. This includes support for ongoing staff town halls and daily huddles; Develop a workforce planning strategy in order to assess current state and identify future staffing needs Review the current recruitment strategy, incorporating best practices and building relationships with external partners including partnering with local personal support worker (PSW) training programs to create direct access to new recruits; and Evaluate current onboarding, orientation, "Buddy" mentoring and education plans for staff and any other staffing resources such as agency staff. This evaluation should consider mission, culture, person-centred philosophy and staffing models. 	Opportunities exist to further support staff wellness and establish strategies to reduce gaps in staffing.	<p>Actions include:</p> <ul style="list-style-type: none"> Establishing a wellness program, which includes enhanced grief support Continuing to leverage daily team member huddles, ACC's TEAM (internal communication platform), visual notice boards, and town halls (one per quarter) to support staff engagement and two-way communication Ensuring a formal recognition of team members via daily huddles, leveraging the existing SPOT award program Providing on-site Employee Assistance Program support Reviewing staff-to-resident ratios to ensure appropriate staffing levels are in place ACC will assess Temporary Full-Time (TFT) team members for permanent full-time positions and offers will be provided Returning to ACC's Talent Acquisition model Should ACC engage external agencies for staffing needs, candidates will need to complete on-site interviews with Altamont hiring managers, to confirm skills, qualification and overall fit with the Sienna Senior Living culture Establishing a formal onboarding process and return to work orientation 	Complete
	18. Sienna Senior Living should retain occupational health nurses who should use established standards of practice to support staff in their return to work.	Prior to SHN's involvement, an occupational health nurse for the home did not exist. In addition, a process to track and monitor staff absence and communicable disease surveillance (including employee travel) did not exist.	<ul style="list-style-type: none"> Sienna Senior Living will hire an occupational health nurse. The nurse will establish occupational health services related policies and procedures, and will create individual plans for return to work 	Complete
	19. Altamont should consider revamping its medical care model to ensure that there are on-site primary care practitioners, even in outbreak, if necessary. This could involve Nurse Practitioners. An opportunity for formal mentorship with SHN can be provided for expert clinical practice development for the Nurse Practitioners.	SHN identified that physicians were delivering care remotely, and the medical oversight model was unclear.	<p>ACC will:</p> <ul style="list-style-type: none"> Review current contracts Establish a visit and on-call schedule Target a physician visit for a specified number of days per week Retain access to a Nurse Practitioner five times a week Use virtual care options, if available, for emergency evening physician assessments Establish external mentorship and coaching (e.g. SHN and community of practice) 	In progress

	<p>20. Standard work should be evolved to ensure up-to-date care plans, goals of care, medication lists, physical exams of residents including weight assessments, and communication by the primary care provider with families. This may necessitate changes to funding, oversight, and policy, to achieve.</p>	<p>The expectations of the medical model and Nurse Practitioner role require clarity to optimize assessments and care coordination.</p>	<ul style="list-style-type: none"> ACC will: <ul style="list-style-type: none"> Review and ensure policies and procedures regarding clinical assessments, documentation, care planning and communication via a Professional Advisory Committee is completed Implement 'Project Care' that outlines clear leadership accountabilities for clinical care and programs 	<p>Complete</p>
	<p>21. Consideration should be given to asking primary care practitioners to obtain IPAC education through an accredited source.</p>	<p>Capacity building is required in IPAC. Physicians were not on site during the outbreak. Knowledgeable health care practitioners are essential to quality and safe resident care.</p>	<ul style="list-style-type: none"> ACC will: <ul style="list-style-type: none"> Develop a plan to have IPAC education available to all primary care practitioners under contract with Altamont 	<p>In progress</p>
<p>Professional Practice and Education</p>	<p>22. Altamont should develop a clinical practice lead for professional practice support and staff education. An opportunity for formal mentorship with SHN can be provided for expert clinical practice development.</p>	<p>Dedicated on-site clinical practice expertise is required to support quality care and team capacity.</p>	<ul style="list-style-type: none"> ACC will establish formal mentorship support for clinical practice The Clinical Care Partner will be on-site to assist with clinical practice and education Furthermore, Sienna Senior Living will be implementing the 'CARE' model 	<p>In progress</p>
	<p>23. Altamont should clearly map out clinical assessment and escalation workflow processes. These include specific role descriptions, documentation of accountabilities, clear escalation triggers/timelines, family/resident inclusion, communication tools, escalation including physician involvement and access to external specialized consultation.</p>	<p>An opportunity for improvement included communication between shifts and types of team members (e.g. PSW and Registered Nurse). This could be better facilitated with standard processes.</p>	<ul style="list-style-type: none"> ACC will re-establish accountabilities, processes, and tools to facilitate clinical assessment processes through the Resident Assessment Instrument (RAI) and clinical care plans (e.g. workflow maps, SBAR) 	<p>Complete</p>
	<p>24. Altamont should ensure clear assessments and medication workflow processes including knowledge translation for the current Nurse Practitioner and staff on:</p> <ul style="list-style-type: none"> Therapeutic drug monitoring; Use of specific order sets; Routine consultation with a pharmacist; Use of stool charts; and Awareness of specific policies such as high-alert medication processes. 	<p>Opportunities exist to standardize care via use of order sets and establishment of processes (including algorithms and tools). Knowledge translation regarding these processes could be optimized</p>	<ul style="list-style-type: none"> The Nurse Practitioner will engage in a mentorship program and review of Sienna Senior Living practices 	<p>Complete</p>
	<p>25. Altamont should establish a schedule and education plan for nursing staff on acute, acute on chronic, and chronic pain tools, assessment, and pain management. An expedited communication plan within the team to ensure timely acute assessment for the treatment of pain should be developed.</p>	<p>The opportunity for capacity building regarding pain management was identified.</p>	<ul style="list-style-type: none"> ACC will: <ul style="list-style-type: none"> Engage assessment courses for staff for nursing clinical practice Define the Nurse Practitioner as the lead for pain management, with clear team assessments and reporting through Safety and Quality meetings Ensure that Pain and Palliative Committee meetings are initiated Work with education partners (e.g. Humber College) to upskill existing team members, and establish a communications process to ensure timely assessment and follow-up. Furthermore, existing policies and procedures will be reinforced 	<p>Complete</p>
	<p>26. Altamont should establish a schedule for a Goals of Care Case Conferences with residents, families, and the team. This may, at times, include a virtual appointment with a palliative care team.</p>	<p>Care conferences were not consistently scheduled with clear processes.</p>	<ul style="list-style-type: none"> ACC will establish schedules for resident care conference as per existing policies and procedures, and ensure audits are in place to ensure compliance 	<p>Complete</p>
	<p>27. Altamont should coordinate an education plan with a schedule and knowledge translation competency review for specialized care courses including Learning Essentials Approaches to Palliative Care (LEAP Course), to enhance palliative and end-of-life care.</p>	<p>The opportunity to align practices and knowledge with palliative best practices was identified.</p>	<ul style="list-style-type: none"> ACC will coordinate Palliative Care LEAP training for team members (including physicians) 	<p>In progress</p>
	<p>28. Altamont should implement an early delirium-screening tool to assess acute confusion and use of an evidence-based order set to support standardized assessment and management plans. The order set would support access to external specialized geriatric and psychiatry consultation for residents with complex needs. All staff should be oriented and routinely educated on these practices and processes.</p>	<p>The opportunity to utilize standardized assessment tools for early identification and intervention was identified</p>	<ul style="list-style-type: none"> ACC will: <ul style="list-style-type: none"> Re-educate team members on the Responsive Behavioral Program that includes assessment tools and intervention approaches Re-educate team members on the process for referrals to specialists and community partners 	<p>In progress</p>

Quality of Patient Care and Patient Safety	29. Altamont should develop a process for the reporting, reviewing, analysis, and creation of action plans for all incident reports. All staff and leaders with associated accountabilities should be involved.	The opportunity for clear and consistent review processes was identified.	<ul style="list-style-type: none"> ACC will: re-establish the Quality and Risk Management Programs, and ensure accountabilities are aligned to the current Management Team 	Complete
	30. Altamont should ensure a process is in place to routinely weigh residents each month, documenting weights and identifying clear triggers for referral to a dietitian for timely review, action, and monitoring of residents. Auditing and reporting processes must be established to ensure consistent application of the process to lead to better clinical outcomes.	Resident weights and referrals to dietitian with follow-up was inconsistent.	<ul style="list-style-type: none"> ACC will reinforce existing related policies and procedures, and deploy the nutrition and weight management audit as per the Sienna Quality Management Program 	Complete
	31. Altamont should establish a standardized falls prevention process with clear role accountabilities, timelines, and action plans to ensure falls risk is identified for every resident. This should include simplified and consistent signage, well-documented mitigating strategies, and a clear system for ongoing monitoring and family communication.	Existing processes around falls prevention were unclear.	<ul style="list-style-type: none"> ACC will re-establish the Falls Program with reporting monthly to the Resident Quality & Safety and the Professional Advisory Committee. The focus will be on prevention, assessment, risk mitigation, falls huddles, visual cues for falls risk, safety measures, and family communication 	Complete
Communications	<p>32. Altamont should:</p> <ul style="list-style-type: none"> Create a communications plan for residents, staff, families, and the public; Ensure that the organizational communication structures are created with staff and provided through multiple avenues with input from staff (i.e. emails, huddles, etc.); and Consider adopting virtual town hall events for staff and families on a regular basis to keep them informed. 	Opportunities were identified to increase information sharing and transparency with team members, residents and their families.	<ul style="list-style-type: none"> ACC will: Implement a regular newsletter publication, and regular virtual town halls for staff and families allowing for timely, two-way communication. Establish daily huddles Develop plans to introduce a team APP across Sienna Senior Living to allow for timely communication to team members 	Complete

Concluding Remarks

The Voluntary Management Contract will end on September 6, 2020. SHN and Altamont Care Community will continue the strong partnership that has developed between the two organizations. This includes a firm commitment to work together in the interests of residents, not just in the *near* future, but in the *foreseeable future*.

On September 1, 2020, SHN submitted the completed *Hospital/Long-Term Care Home Partners Transition & Sustainability Checklist* to the MLTC formally attesting to the Hospital's confidence in the stability of Altamont Care Community with respect to Leadership, Staffing, IPAC, Resident Care, Emergency Preparedness, Occupational Health & Safety, Communications, and Inspections. SHN is pleased with the protocols now in place, which will help to ensure that Altamont Care Community is equipped to manage any potential future outbreaks effectively.

Altamont Care Community participated in a table-top exercise hosted by Scarborough Health Network on September 2, 2020. The exercise simulated a second COVID-19 wave impacting residents and staff and set out to test the following objectives:

1. The functionality, efficiency, and effectiveness of decision-making
2. Formal or planned coordination, communication, and information-sharing mechanisms between relevant departments involved in a COVID-19 response
3. Existing capabilities (resources, logistics, and support) for operational response to COVID-19 according to plans and procedures, and identifying capacity strengthening needs.

As an added measure, a transition strategy will be implemented for three months upon the expiry of the contract. This includes:

- Weekly scorecard submissions for continued performance monitoring
- Bi-weekly meetings between SHN and Altamont Care Community leadership to review progress on the Implementation and Sustainability Plan for items not yet completed but still in progress
- On-site opportunities for direct engagement, observations, and feedback
- Monthly check-ins with the MLTC

SHN will provide mentorship support for IPAC and clinical care (i.e. wound and skin care), improved consultation access to SHN specialists including access to palliative care, geriatric psychiatry, and internal medicine, as required.

SHN thanks Altamont residents and families for their ongoing patience, support, and feedback. We heard from those families on the many town hall events hosted.

Given the extraordinary review undertaken over the past three months of the Voluntary Management Contract, SHN can state without reservation that this LTC home once again provides high quality resident care. It should not be lost that only two LTC homes in Scarborough (of 22) have undergone this extraordinary level of scrutiny and review. SHN believes that residents and their families, staff, the Scarborough population, Ontario Health East and the MLTC can be assured that safe, quality resident care has been restored to ACC. SHN has confidence in ACC, and would encourage others to as well. SHN looks forward to preparing for the future together with Altamont residents, their families and staff.

The memory of the 53 residents and one staff who lost their lives at ACC during the COVID-19 outbreak of 2020 has been commemorated in part by Altamont staff's dedication to learn, problem solve, and embrace change to affect sustainable solutions for the future. They did this, to ensure that such an event can never happen again at Altamont.