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NEWMARKET AND MAPLE HEALTH CENTRES MEDICAL DIRECTOR'S 2009 ANNUAL REPORT

The Community and Health Services Committee recommends the adoption of the recommendation contained in the following report dated February 25, 2010, from the Commissioner of Community and Health Services.

1. RECOMMENDATION

It is recommended that this report be received for information.

2. PURPOSE

This report is provided to Regional Council, as the governing body of the Regional Long Term Care Facility Program, to meet their legislated responsibility under Section 26(3) of Regulation 637 of the *Homes for the Aged and Rest Homes Act* for ensuring that the Newmarket Health Centre and Maple Health Centre are in compliance with applicable legislation and standards for the provision of long term care.

3. BACKGROUND

Medical Director reports to governing body

Legislation governing the operation of municipal long term care facilities dictates that the Medical Director must report to the governing body of the facility on an annual basis. The report is to summarize the general health condition of the residents, the medical, nursing, activation and other therapeutic services provided to them, and include any recommendations considered necessary to ensure proper conditions of health and an adequate state of well being for all residents.

The Medical Director's 2009 Annual Report (*see Attachment 1*) for the Newmarket and Maple Health Centres supports Council's responsibility to ensure that a quality management system is developed and implemented for monitoring, evaluating and improving the quality of care and services provided to the residents.

The Medical Director, Dr. Catherine Meunier, is a Medical Doctor. Dr. Meunier has her Masters in Science in Experimental Medicine and a Bachelor's degree in Biology. She is certified by the Canadian College of Family Physicians as well as The College of Physicians and Surgeons of Ontario.

4. ANALYSIS AND OPTIONS

Quality and level of care provided at the Newmarket and Maple Health Centres remains high

The Medical Director's 2009 Annual Report indicates that the quality of care provided in the Region's Long Term Care Facility Program continues to be at a high level as confirmed by Ministry reviews and client/family satisfaction questionnaires.

Levels of care required in Long Term Care facilities are measured using a system known as the Case Mix Index. This system classifies people into groups that are homogeneous in their use of resources based on each resident's level of acuity and funding is calculated based on the Case Mix Index. The level of care required by the residents of both Centres is significantly higher than the provincial average as evidenced by the Case Mix Index rating of 106.67 for the Maple Health Centre and 105 for the Newmarket Health Centre. The provincial average Case Mix Index is 100.

The infection control program within both Centres focuses on the proactive prevention of disease. Immunization plays a significant role in infection control and is a vital component of the infection control program in the Long Term Care division. Immunization rates for both staff and residents in both Centres significantly exceed sector averages with a staff immunization rate of 94% and a resident immunization rate of 98%. Long Term Care sector provincial average vaccination rates for staff are 68% and for residents 95%.

The Medical Director has concluded that the care, programs, and services provided at the Newmarket Health Centre and Maple Health Centre continue to be in compliance with the requirements of legislation and regulations.

5. FINANCIAL IMPLICATIONS

There are no financial implications associated with this report.

6. LOCAL MUNICIPAL IMPACT

There are no local municipal implications for this report.

7. CONCLUSION

The Medical Director's 2009 Annual Report provides confirmation that the Community and Health Services Department's Housing and Long Term Care Branch continues to deliver high-quality long term care services for the residents of all local municipalities. For more information on this report, please contact Sylvia Patterson, General Manager, Housing and Long Term Care at Ext. 2091.

The Senior Management Group has reviewed this report.

(The attachment referred to in this clause was included in the agenda for the March 10, 2010 Committee meeting.)

**NEWMARKET AND MAPLE HEALTH CENTRES
Medical Director's 2009 Annual Report**

OVERVIEW

The Newmarket and Maple Health Centres provide care and services to individuals residing in the Regional Municipality of York and surrounding areas. Special emphasis is placed on meeting the needs of hard to place/difficult to serve clients. These are individuals with heavy, complex care requirements and also individuals who endure a high degree of cognitive or psychiatric impairment, requiring a protected secure environment. Approximately 90% of the clients at the Newmarket and Maple Health Centres are incontinent of bowel and bladder and most have three or more debilitating chronic illnesses. A total of 100% of the residents require assistance with meals and 100% require some assistance with dressing.

For the year 2009, Dr. Catherine Meunier continued as the Medical Director for both facilities.

MEDICAL SERVICES

The Maple Health Centre (MHC) continues to have a staff of four attending physicians, with one assigned to the Convalescent Care Program. The Newmarket Health Centre (NHC) continues to have four attending physicians, with one assigned to the Convalescent Care Program. All physicians provide services that meet the Ministry of Housing and Long-Term Care guidelines and standards. The attending physicians at both centers provide comprehensive after hours care (evening/nights, weekends and holidays).

Newmarket Health Centre

The Newmarket Health Centre provides services to a mostly English speaking population. Clients range in age from 46 to 97 years, with an average age of 71.5 years. Approximately 93% of the population is over 65 years of age while 7% are younger than 65. A total of 87% of the population is 75 years of age or older. The Centre has a large number of female residents, the ratio being approximately 2:1 female:male. While predominately an English speaking population, 90% speak and understand English, 20% of the resident population has identified another language as their language of preference. The Newmarket Health Centre focuses on serving clients with heavy complex care requirements and clients with significant cognitive impairment and psychiatric care requirements.

All physicians are appointed members of the medical staff in the "attending physician" category. Based on a formal compliance to contract review, it was determined that all of the physicians continue to be in substantial compliance with the standards set out in their contracts and all have been offered and signed new contracts for 2010. Dr. Leung and Dr. Hughes participate in the Dixon physician on-call service. Dr. Khousam and Dr. Pierre Geoffroy provide their own after hours coverage. To assist the physicians in providing medical care, a consulting psychiatrist, Dr. Paramsothy, makes regularly scheduled visits to the Centre.

A new mobile dental service has been successfully recruited to provide in-house dental care for the residents at the Newmarket Health Centre. Podiatry services for both Centres are provided by Dr. Marcus who offers specialized foot care services to all residents. Jack Knight provides in-house psychological counselling and services at both facilities. Laboratory services are provided by LifeLabs Medical Laboratory Services. Diagnostic and imaging services are provided by St. Louis Imaging Consults Inc. and pharmacy services are provided under contract by MediSystem Pharmacy and the pharmacy consultant is Brenda Bruinooge.

Maple Health Centre

The Maple Health Centre has a somewhat different client profile. It is also characterized by a high percentage of females, but has greater demand for behavioural management care and a more culturally diverse client population. Clients range in age from 47 to 99 years of age with an average age of 85.1 years.

The defined population of the Maple Health Centre has approximately 82% of the population over the age of 75 years of age or older and 9% is less than 65 years. There is a preponderance of females to male residents with approximately 66% female population. Although 73% of the Centre's population speaks and understands English, 46.4% of the resident population identified a language other than English as their preferred language. The most predominant preferred language is Italian (26.8%). Maple Health Centre services both the cognitively impaired and the heavy complex care client. The Maple Health Centre also provides a Convalescent Care Program with 15 beds.

The following general practitioners provide care at the Maple Health Centre: Dr. Michael McAteer, Dr. Paul Randall, Dr. Randy Leifer and Dr. Mike Hamilton. Their on-call schedule is shared amongst them to provide 24/7 physician coverage. All are appointed members of the medical staff in the "attending physician" category. After completing a formal compliance to contract review, all the physicians were offered and signed new contracts for 2010.

Dental care is provided by Dr. Michael Capocci, and Dr. Marcus, a podiatrist, provides specialized foot care services; both attend on a regular basis. In-house psychological counselling and services are provided by Jack Knight. Laboratory services are provided by LifeLabs Medical Laboratory Services. Diagnostic and imaging services are provided by St. Louis Imaging Consults Inc. and pharmacy services are provided under contract by MediSystems Pharmacy and the pharmacy consultant is Brenda Bruinooge.

The Medical Department continues to implement an effective quality management system for promoting, evaluating and improving the quality of care and services it provides to residents with a special emphasis on safety.

CONVALESCENT CARE PROGRAM

At both the Newmarket and Maple Health Centres a more intensive rehabilitation program is provided for clients in the Convalescent Care Program. The goals of the program are: to provide appropriate, quality care to individuals who need time to recover strength, endurance, or functioning before discharge to the community; to alleviate hospital pressures; and to make the most effective use of system resources. The Convalescent Care Program is available to individuals 18 years of age and older that meet the admission criteria set by the Ministry.

The program promotes and encourages self care and capacity while providing the necessary rehabilitation services. The program is co-ordinated by an experienced Rehab RN. Services also offered include program specific Occupational Therapists, Physiotherapists and Physiotherapy Assistants. A multidisciplinary team that includes nursing, medicine, dietary, social work, rehabilitation staff and the Central Community Care Access Centre (CCAC) meet on a weekly basis to review each client's goals and rehabilitation needs. They also determine and coordinate a discharge plan and date.

The addition of this program to both Centres has enhanced all aspects of care and lifestyle for all residents and staff. It has proven to be a valuable service for the community and has helped to alleviate pressures in acute care hospitals. The program has an overall success rate of over 90% in rehabilitating clients and discharging them back to the community and over 12,000 acute hospital bed days have been avoided as a result of the program.

COMMITTEE ACTIVITIES

Admission and Discharge Committee

This multi-disciplinary committee allowed for each member to review applications independently and for decisions to be made within a one-week time frame.

The waiting lists for both Centres continue to grow, and complex care demands continue to rise. The Ministry of Health and Long-Term Care has classified the Case Mix Index (acuity level of our clients) as 106.67 at MHC and 106 at NHC. The provincial average Case Mix Index is 100. The Case Mix index is a measure of the acuity level/care needs of our residents.

Medical Advisory and Therapeutics Committee (MATC)

This Committee met quarterly to review and respond to issues related to medical practice, palliative care, ethics, medication administration and infection control. It was attended by all medical staff, representatives from administration, nursing, pharmacy, social work, dietary, activation and public health staff.

In 2009, this committee discussed and reviewed the following:

- Anticoagulation protocol
- All recommendations/best practices developed by the Institute for Safe Medication Practices (ISMP)
- Medication updates and reviews
- Admission and routine diagnostic testing
- Palliative Care medication update
- CIHI indicators
- Computerized Annual Health Exam Form
- Resource Palliative Care Physicians
- Pharmacy review of Medical Orders
- *Accessibility for Ontarians with Disabilities Act, 2005*
- Respite admission physical exam
- New admission and transfer of client allocation policy
- PointClickCare Incident reports
- Vaccination update for clients
- Nurse Led Outreach initiative
- Accreditation

Health Care Records Committee

This Committee, which had representation from social work, nursing, dietary, activation and medicine, met quarterly for chart auditing and for revision and review of the forms used in charting. All chart audits were reviewed to ensure that consistent and high standards for documentation are maintained and passed on to the Medical Director for review at MATC meetings.

Full implementation of the Resident Assessment Instrument and Minimum Data Sheet (RAI MDS) computerized system continues to be monitored very closely by the Committee.

OUTBREAKS/INFECTION CONTROL

Newmarket Health Centre had one enteric outbreak and three respiratory outbreaks in 2009. Maple Health Centre experienced no outbreaks in 2009. Both Centres continue to screen residents on admission and return from hospital for Methicillin Resistant Staphylococcus Aureus (MRSA) and Vancomycin Resistant Enterococci (VRE).

In collaboration with the Public Health Branch a comprehensive Pandemic Plan has been developed and implemented by the Housing and Long Term Care Branch.

Pneumococcal vaccination was updated for all the clients. H1N1 and seasonal flu vaccines were also offered and administered with over 98% of our residents and 94% of our staff receiving the vaccine.

SUMMARY

The quality of care for the Region's Municipal Long Term Care Facility Program continues to be at a high level as confirmed by the Ministry of Health and Long-Term Care compliance reviews and our client satisfaction questionnaires in which over 98% of clients and/or families reported the services they were receiving as either good or excellent.

In my professional opinion, the care, programs and services provided at the Newmarket and Maple Health Centres continue to be in compliance with the requirements of the legislation and regulations.

For the year 2010 we will continue to provide comprehensive medical care, focus on prevention of disease, continue interdisciplinary team building, focus on resident safety and continue educational development.

Original Signed by Dr. Catherine Meunier

Catherine Meunier, MD, CCFP, MSc
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December 20, 2009