ANNUAL SUMMARY 2022

ANNUAL SUMMARY 2022

Venta Care Centre
Est. • 1953

Contents

Section 1. Executive Summary

Venta Care Centre remained committed to providing compassionate, resident-centred care while responding to ongoing operational challenges and evolving public health requirements throughout 2022. The organization focused on strengthening clinical governance, improving resident safety, enhancing workforce stability, and advancing quality improvement initiatives aligned with Alberta Continuing Care Health Service Standards.

Throughout the year, Venta Care Centre achieved full occupancy for the first time in three years, strengthened medication management systems, maintained strong infection prevention and control practices, improved workforce engagement, and continued to enhance resident quality of life through targeted operational and clinical improvements.

This report demonstrates the organization's commitment to accountability, transparency, resident-centered care, and continuous quality improvement.

Section 2. Key Performance Results

Throughout 2022, VCC maintained service continuity and operational stability.

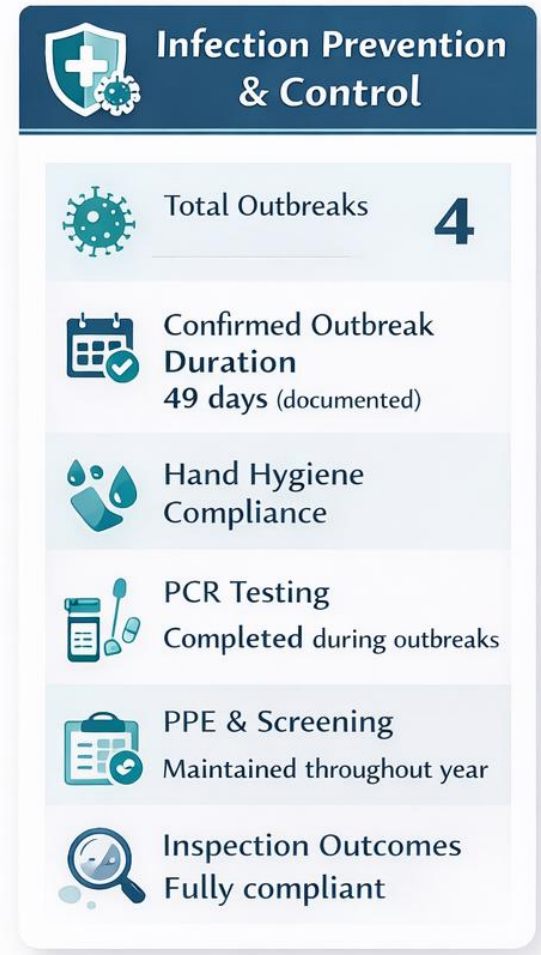
Documented Performance Results (from 2022 data):

- Multiple COVID-19 outbreaks were identified, managed, and resolved
- Continued resident admissions occurred throughout the year
- Care conferences were held consistently to support resident-centered care planning
- Volunteers and recreation staff supported residents through in-person and virtual engagement
- Strong audit, inspection, and accreditation outcomes were achieved

Performance Summary:

- Average Daily Census: **[145]**
- Total Admissions (2022): **[72]**
- Total Care Conferences Held: **[131]**
- Total Volunteer Hours: **[381.35]**

Section 3. Infection Prevention & Control (IPC)



Infection Prevention and Control (IPC) practices are measures used to reduce the spread of infections within the care environment. These measures include hand hygiene monitoring, personal protective equipment (PPE) use, outbreak management, environmental cleaning, and staff education.

All outbreak management processes followed Assisted Living Alberta (ALA) guidance and provincial continuing care requirements.

IPC Activities Implemented:

- Emergency COVID meetings during outbreak investigations
- Facility-wide PCR testing of residents and staff during outbreaks
- Routine screening and testing protocols for staff
- Ongoing PPE use, masking, and environmental cleaning
- Daily and routine safety audits (e.g., bed alarms, call bell response times)

Confirmed IPC Outcomes (from 2022 data):

- Multiple outbreaks successfully resolved, including outbreaks lifted in February, April, June, and September
- Hand hygiene compliance monitored and sustained at **89–90%** by year end
- Environmental Public Health, Site Preparedness, and Quality Monitoring Inspections completed with compliance

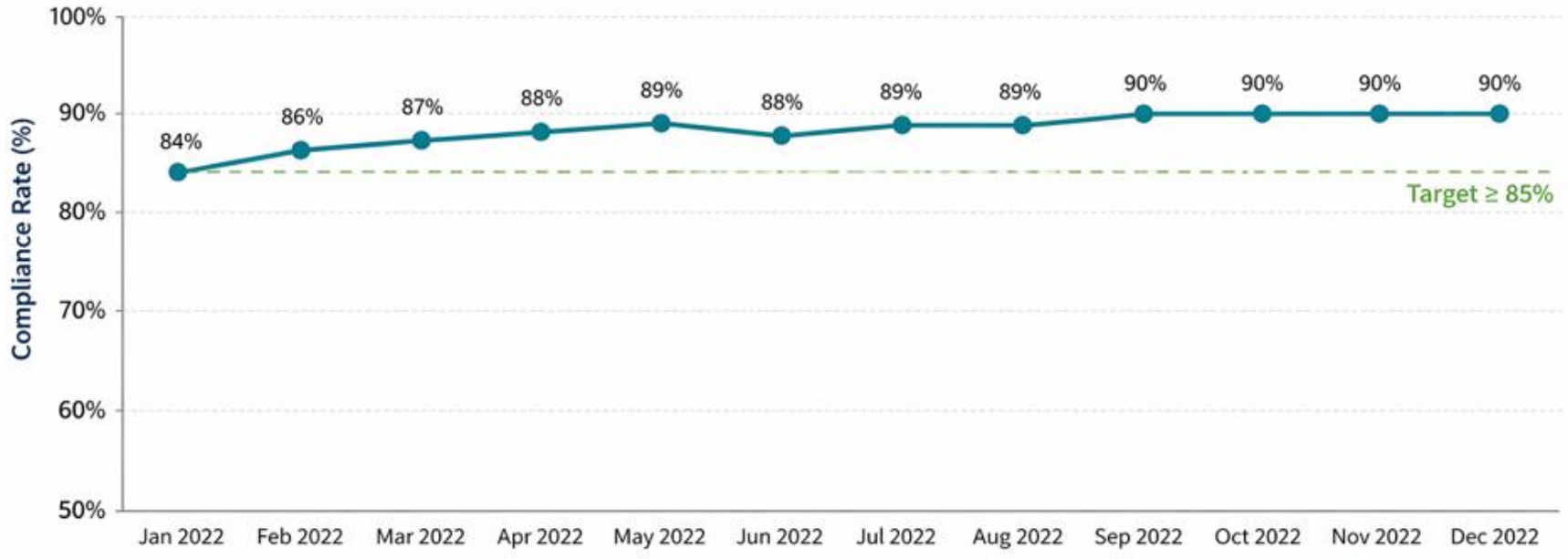
IPC Data:

- Total number of outbreaks in 2022: **[4]**
- Total days on outbreak status: **[49 days]**

Hand Hygiene Compliance Trend – 2022

Consistent monitoring and staff education have supported strong hand hygiene practices throughout 2022.

Year-End Compliance
90%
(Target ≥ 85%)



Key Takeaways

- Hand hygiene compliance remained consistently above the target of 85% throughout 2022.
- Sustained performance reflects ongoing education, reminders, and accessibility of hand hygiene supplies.
- Continued focus will support maintenance of this strong performance.

Thank you to our staff for their ongoing commitment to resident safety.

Section 4. Medication Management & Incidents

VCC continued to focus on safe medication practices and resident-centered prescribing.

Medication governance refers to the systems used to ensure medications are stored, administered, documented, and monitored safely.

Chemical restraint monitoring refers to the careful review of medications that may affect resident behavior or mobility to ensure they are used safely, appropriately, and only when clinically necessary.

Medication incidents and trends were reviewed regularly by leadership to identify opportunities for staff education, process improvement, and resident safety enhancement.

Medication Management Activities:

- Onboarding of a new pharmacist (February 2022)
- Ongoing interdisciplinary medication reviews
- Continued deprescribing and chemical restraint reduction initiatives

Chemical Restraint Reductions (Documented 2022 Data):

- Medications discontinued: **[15]**
- Medication doses reduced: **[9]**
- Residents discharged from chemical restraint monitoring: **[5]**

Medication Incident Data:

- Total medication incidents reported: **[5]**
- Medication incidents resulting in harm: **[0]**

Medication trends and prescribing practices were reviewed by leadership and informed ongoing quality improvement actions.

Section 5. Falls Prevention & Resident Safety

Falls continued to be monitored closely throughout 2022 to support resident safety and identify opportunities for prevention.

A total of 236 falls were reported during the reporting period. Most falls resulted in no serious injury, with only a small number requiring hospital assessment or additional medical intervention.

Falls data were reviewed regularly through leadership meetings and interdisciplinary care reviews to identify contributing factors, including mobility decline, cognitive impairment, environmental risks, and changes in resident acuity.

Safety Monitoring Activities:

- Bed alarm audits conducted twice daily on weekdays
- Daily monitoring of call bell response times
- Review of safety incidents through disclosure processes

Prevention Strategies Implemented

- Repositioning education provided to staff
- Lift and Broda chair safety education completed
- Weekly reviews of fall-related incidents conducted
- Enhanced acuity monitoring tools implemented
- Resident-specific prevention interventions updated following incidents

Falls Statistics:

- Total number of falls: **[236]**
- Falls resulting in injury: **[56 minimal injuries resulting from falls, 2 requiring hospital interventions]**
- Repeat fallers: **[5]**

Leadership identified the need to strengthen centralized tracking and trend analysis of falls data.

Section 6. Complaints, Compliments & Feedback

Feedback from residents, families, and staff continued to inform operational improvements and quality initiatives throughout 2022.

Common Feedback Themes

- Communication during outbreaks
- Meal preferences and dining experience
- Staff responsiveness
- Scheduling and staffing consistency
- Resident activity engagement
- Family communication updates

Actions Implemented Following Feedback

- Improved communication updates during outbreaks
- Enhanced shift-to-shift communication systems
- Workload redistribution implemented
- Break schedule redesign following staff feedback
- Increased leadership visibility and follow-up processes

Feedback Mechanisms Used in 2022:

- Resident, family, and staff satisfaction surveys
- Disclosure surveys related to resident safety incidents
- Ongoing communication during outbreaks and public health changes

Feedback Outcomes:

- Total complaints received: **[6]**
- Total compliments received: **[6]**

Actions taken in response to feedback included adjustments to public health measures, communication practices, and care processes.

Section 7. Resident Experience & Quality of Life Highlights

Venta Care Centre continued to prioritize resident quality of life and meaningful engagement throughout 2022.

Resident Experience Highlights

- Increased recreation participation opportunities
- Improved family communication during outbreaks
- Resident participation in research and quality-of-life initiatives
- Wellness room enhancements supported through grant funding
- Courtyard and environmental improvements to support resident enjoyment and accessibility

Resident & Family Feedback Highlights

- Positive feedback regarding staff compassion and responsiveness
- Increased engagement in recreational programming
- Improved communication satisfaction during outbreak periods

Section 8. Audit, Inspection & Accreditation Outcomes

PIR Audit Clarification

Partners in Injury Reduction (PIR) audits evaluate workplace safety practices and injury prevention measures to support a safe environment for staff and residents.

Site Preparedness Audit Clarification

Site preparedness inspections assess emergency readiness, infection prevention measures, and organizational preparedness during outbreaks or emergencies.

Confirmed 2022 Outcomes:

- Accreditation Survey (September 2022): **100% compliance – Exemplary Standing (second consecutive year)**
- PIR Audits: **98–100% compliance**
- AHS Quality Monitoring Inspections: **Fully compliant**
- Accommodation Standards Inspections: **100% compliance**
- Environmental Public Health and Site Preparedness Inspections: **Compliant**

Audit results were reviewed by leadership, with corrective actions implemented where required.

Section 9. Leadership Oversight & Risk Management

Leadership maintained active oversight of organizational quality, safety, and compliance throughout 2022.

Areas regularly reviewed included:

- Infection prevention and outbreak trends
- Falls and resident safety incidents
- Medication management and medication incident reviews
- Wound care trends and high-risk resident monitoring
- Audit and inspection outcomes
- Workforce stabilization and staffing challenges
- Environmental safety concerns
- Emergency preparedness activities

Leadership meetings included ongoing review of quality indicators and risk mitigation strategies to ensure continuous improvement and regulatory compliance.

Corrective actions and improvement plans were implemented when risks or gaps were identified.

- Review of audits, inspections, and accreditation results
- Emergency COVID meetings
- Monitoring of outbreak trends, safety indicators, and staffing levels
- Follow-up education and process improvements in response to identified risks

These activities demonstrate ongoing monitoring of risk, safety, and compliance.

Section 10. Strategic Direction, Resources & Workforce Planning

10.1 Organizational Priorities

Organizational priorities in 2022 included:

- Resident safety and quality of care
- Infection prevention and outbreak management
- Workforce stability and education
- Regulatory compliance and risk mitigation
- Investment in technology and infrastructure

10.2 Resource Allocation

Resources were allocated to support these priorities through:

- Staff education and mandatory training programs
- Technology and system enhancements
- Safety, security, and environmental improvements

Resource Allocation Metrics:

- Education and training investment: **ADP scheduling software**

10.3 Workforce Planning

Workforce planning focused on maintaining adequate staffing coverage, supporting staff well-being, and ensuring appropriate skill mix.

Workforce Indicators:

- Total staff complement: 265
- Staff turnover rate: 37%
- Mandatory education completion rate: 100% (December 2022)

Section 11. Quality Improvement Activities

11.1 Quality Goals for 2022

Based on operational needs and risk assessment, VCC's quality goals included:

- Maintaining strong infection prevention and control practices
- Enhancing resident safety and medication management
- Improving monitoring, documentation, and data accuracy
- Supporting workforce stability and staff education

11.2 Improvements Implemented

- Introduction of a new disclosure survey for resident safety incidents
- Implementation of a new staff scheduling system
- Expanded safety audits (bed alarms, call bells)
- Technology trials (e.g., robotic floor cleaning)
- Launch of a redesigned facility website
- Ongoing mandatory education and immunization campaigns

11.3 Measurable Outcomes Achieved

Documented Outcomes:

- Audit and accreditation compliance rates at or near **100%**
- Hand hygiene compliance sustained at **89–90%**
- Demonstrated reductions in chemical restraint use by **5%** each year

11.4 Areas Requiring Further Improvement

- Consolidation and reporting of falls and medication incident data
- Increasing completion rates for online education modules (62% by year end)
- Expanded trend analysis to support proactive prevention strategies

Section 12. Regulatory Alignment & Accountability

Venta Care Centre remains committed to maintaining compliance with Alberta Continuing Care Health Service Standards and supporting accountability to residents, families, staff, and the community.

- This report reflects the organization's commitment to:
- Resident-centered care
- Continuous quality improvement
- Regulatory compliance
- Safety and risk reduction
- Transparency and accountability
- Quality monitoring activities, audits, inspections, and improvement initiatives remained aligned with provincial standards and organizational priorities throughout 2022.

Section 13. Conclusion

In 2022, Venta Care Centre demonstrated resilience, adaptability, and a continued commitment to delivering safe, high-quality, resident-centered care in a complex and evolving healthcare environment. Despite the challenges associated with multiple COVID-19 outbreaks and changing public health requirements, the organization maintained operational stability, achieved strong compliance across all regulatory and accreditation standards, and ensured continuity of care for residents.

Key achievements throughout the year included the successful management and resolution of four COVID-19 outbreaks, sustained hand hygiene compliance at 89–90%, and exceptional performance in external audits, including achieving 100% compliance and Exemplary Standing through Accreditation Canada. Clinical quality initiatives, particularly in medication management, resulted in measurable reductions in chemical restraint use, supporting improved resident outcomes and alignment with best practices in person-centered care.

Resident safety remained a priority, with structured monitoring systems such as bed alarm audits, call bell response tracking, and incident disclosure processes in place. While falls and medication incidents were actively monitored, leadership has identified opportunities to enhance data consolidation and trend analysis to further strengthen proactive risk management strategies.

Engagement with residents, families, and staff remained a core focus, supported by surveys, communication strategies, and feedback mechanisms. Input received throughout the year informed operational decisions and contributed to maintaining a responsive and supportive care environment.

Leadership oversight was evident through ongoing review of performance indicators, audit outcomes, and risk factors. Timely actions were taken in response to emerging trends, including the implementation of new systems, enhanced education initiatives, and process improvements aimed at strengthening quality and safety.

Looking ahead, Venta Care Centre remains committed to continuous quality improvement, with a focus on strengthening data-driven decision-making, improving reporting systems, enhancing workforce capacity and education, and sustaining high standards of care. Strategic investments in technology, staff development, and safety infrastructure will continue to support organizational priorities and ensure the delivery of safe, effective, and resident-centered services.