C.A.R.P. Ottawa December 9th, 2020 Transformative Culture Change (TCC) and COVID-19

It is time for Ontario to reform its long-term care home system by undergoing a transformative culture change that improves quality care. Two elements of transformative culture change which have the potential to mitigate the transmission of infectious diseases are design and staffing.

Overall design impact: The design and decoration of the small home-like environment has been proven to calm and orient residents - especially critical during a pandemic. The flexibility of care and daily routines is healthier for residents and staff which may contribute to minimizing the risk for infections.

Recruitment and hiring of staff: "Staffing is critical to creating a higher quality of life and care for residents. A key strategy for success is to attract, prepare, and invest in people who want to work in long-term care and who reflect the diversity of the resident population they serve." MOHLTC Long-Term Care Staffing Study Advisory Group Report July 30, 2020

Elements of TCC	Impact on Infectious Diseases	Comments
Design		
Small home-like space for 6-8 residents	Residents experience an environment like home. Contact with small number of residents and staff daily reduces the potential spread of an infection. Family can be involved with less chance of infecting large number of residents and staff.	Home-like décor, and specific items to align with interests of the residents support the functioning of residents.
1 and 2 bed- rooms with private bathroom	Potential to isolate sick residents from others while providing home-like space.	
Tub/shower room	Use by a small number of residents reduces potential for spread of an infectious disease.	More flexibility for timing of showering and bathing.
Lounge/dining room/program space	Flexible space for family dining, activities and recreation by a small number of residents and families. Even if family visits restricted due to an infectious outbreak, the small home-like environment has shown improved social engagement of residents, lessening feelings of isolation, depression and of being 'locked in a prison'.	Residents can be involved in meal preparation, setting the table etc. Family-style dining enhances residents' sense of overall well-being. Activities driven by residents' personal interests.
Spare bedroom for isolation	Infected residents can be appropriately isolated yet still be within the 'family' unit.	Flexible use as needed for family visits, dining, staff meetings etc.

Access to safe outdoor space	Potential for outdoor programming and fresh air. Visits during a pandemic could be facilitated.	
Staff work space and storage	Staff can have time away from residents for documentation and relaxation.	
Staffing*		
Staff are valued, supported, recognized and respected for their work.	When staff are valued, supported, recognized and respected, there is better bottom up reporting as issues arise as well as decreased fear of reprisals.	Staff satisfaction goes a long way to fostering quality of care focusing on residents' needs.
Staff are recruited based on ability to exhibit emotional intelligence, empathy, compassion, and have a willingness and ability to learn new approaches.	Emotion-based approaches to care allows staff to spend more time with residents allowing for timely observation in changing health care needs.	Attracting and preparing the right people for employment in long-term care, helps to increase the invested interest that staff have in keeping residents safe.
Staff embrace a shared decision- making process with all staff, families and volunteers.	Timely communication between staff, families and volunteers is essential when a LTC crisis occurs.	Staff can work together on cross- functional teams - leveraging individual skills and expertise to support the residents.
Leadership team role models relationship-based approach to care and empowers staff to do the same.	Staff see role models and will be better able to emulate a holistic approach to care. This allows staff to get to know their residents, understand their needs and can help to keep residents safe.	Excellence in long-term care requires effective leadership and access to specialized expertise.
Critical thinking skills and observation skills are a necessary requirement for recruitment and hiring.	Early detection of health problems will occur and faster implementation of isolation practices will take place.	Attracting the right staff is key in helping to maintain a safe environment for residents.
Timely on-the—job continuing education for staff and volunteers occurs that is responsive to changing residents' needs.	Better reporting during inspection process which will improve provincial LTC home system.	Continuing education can help ensure that staff are up to date on current practices and prepared for the care requirements of residents.

^{*&}quot;The culture of long-term care needs to change – at both the system and individual home level The existing culture in the long-term care sector overall has been described as oriented towards regulatory compliance. The consequence, as reported by long-term care partners, is that staff become overly focused on regulated tasks sometimes at the expense of positive resident outcomes. This culture leads to care providers who may be afraid to speak up to report incidents or errors, out of fear of being reported for non-compliance. In order to best meet the needs of residents and build a high-performing workforce, the culture of the long-term care sector needs to change." MOHLTC Long-Term Care Staffing Study Advisory Group Report July 30, 2020