Regional Long Term Care Family Experience July 2015 to February 2016



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Long Term Care Family Experience

Background

Survey Instrument

The validated long term care family experience survey that was administered to family of long term care residents throughout the Western region was the Consumer Assessment of Healthcare Providers and Systems (CAHPS) Nursing Home Survey: Family Member Instrument (Appendix A) developed by Alberta Health Services in Canada. The survey was administered electronically through Google Forms.

Method

Long term care facilities generated a list of email addresses of resident family members and emailed the survey link. Other facilities had students or a nurse on ease-back administer the survey over the telephone and entered the information directly into Google Docs.

Sample

All resident family members were given the opportunity to complete the survey. Across the Western Health region, 165 participants completed the survey.

Privacy, Confidentiality, Data Security

Privacy and confidentiality were achieved as the survey was completed anonymously and electronically through Google Docs. Any information that could potentially identify the family members was deleted. The data was stored on a password protected computer in the Western Memorial Health Clinic used by Information and Quality staff.

Data Analysis

Survey data was entered directly into Google Docs and the information transferred to a data sheet which was then analyzed using Statistical Package for Social Sciences (SPSS). Descriptive statistics were calculated on regional and site specific data to obtain a general perspective of family or next of kin experiences with long term care services at Western Health. All comments were grouped based on common themes and included in this report as well as listed in Appendix B. The following report provides survey results for the entire Western Health region.

Results

Demographics

A total of 165 participants completed the survey. To gain a more thorough understanding of the demographics of the family or next of kin being surveyed and their loved ones living in long term care, respondents were asked several questions; relation to the resident, if the resident was discharged from the facility or had died, how long the resident lived there, and if they expected the family member to live in a long term care home permanently. When asked the relationship to the resident, 24.2% reported that the resident was their spouse or partner, 55.8% reported their parent, 3.0% reported their aunt or uncle, 11.5% reported their sibling, 3.6% reported their child, 0.6% reported their friend, 0.6% reported other and 0.6% did not report. Although efforts were taken to reduce the potential that a family member or next of kin received a survey after the resident had died, three respondents indicated that the resident had died. Just over 70.9% of respondents indicated that the resident lived in long term care for 12 months or longer, 9.7% reported 6 months to almost 12 months, 6.1% reported 3 months to almost 6 months, 7.9% reported 1 month to almost 3 months, 3.6% reported less the one month, and 1.8% did not report. Nearly 89% reported that they expected the resident to live in a long term care home permanently.

Respondents were asked about how many times they visited the resident in the past 6 months. Nearly 71% reported more than 20 times, 8.5% reported 11-20 times, 6.7% reported 6-10 times, 7.9% reported 2-5 times, 3.6% reported 0-1 times, and 2.4% did not report. Respondents were also asked to indicate whether they were the people who had the most experience with the residents' care and 87.9% reported yes, 8.5% reported no, 1.8% did not know, and 1.8% did not respond.

Other questions were asked about finances, power of attorney, and substitute decision maker (See Table 1). The majority of respondents had power of attorney and were the resident's substitute decision maker. They were also asked gender, education, and ethnic background. Nearly 32% of respondents were male, 66.7% female, and 1.8%

did not respond. Nearly 27% had completed grade school or some high school, 32.7% completed high school, 10.9% completed post-secondary technical school, 7.9% completed some university or college, 14.6% reported that they completed a college or university degree, 1.8% had a post graduate degree, and 6.1% did not report. Ninety point three percent of respondents were white/Caucasian, 6.7% were aboriginal, 0.6% indicated other, and 2.4% did not report.

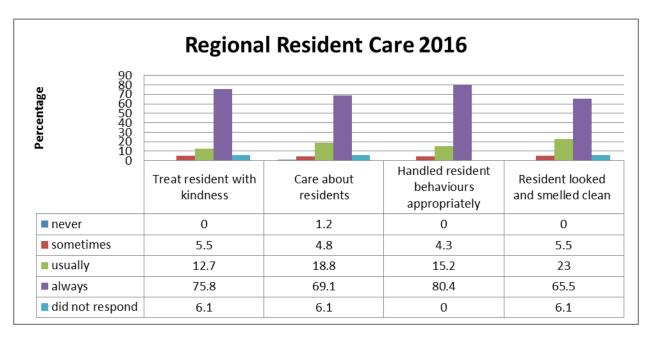
Table 1. Respondent Information

Question	Yes	No	Don't	Did not
	(%)	(%)	know	respond
			(%)	(%)
In the last 6 months, did you help your family with				
managing finances, such as paying bills or filling out	66.7	30.9	0.0	0.0
insurance claims?				
Do you have power of attorney for your family member?	61.8	33.3	3.0	1.8
Are you your family member's substitute decision maker (next of kin)?	89.1	7.3	1.8	1.8

Resident Care

Several questions were asked about nursing care in terms of the respondents' experiences over the past six months (See Figure 1). Of those who reported that they had tried to find a nurse, licensed practical nurse (LPN) or personal care attendant (PCA), 86.6% reported they could usually or always find one when they wanted one. Nearly 89% reported that they had always or usually seen the nursing staff treat the resident with kindness. Just over 87% reported that they usually or always felt that the nursing staff cared about the resident. Respondents were asked if in the last 6 months, they saw any resident behave in a way that made it hard for nurses or aides to provide care such as yelling, pushing, or hitting. Nearly 28% reported yes and of those, 95.7% reported that the nurses and aides always or usually handled this situation in a way that they felt was appropriate. When asked if they had ever seen any nursing staff be rude to their loved one or any other resident, 85.5% reported no, 8.5% reported yes, and 6.1% did not respond. Respondents were asked how often the resident looked and smelled clean in the last 6 months and 88.5% reported usually or always.

Figure 1. Resident Care



Respondents were asked questions about whether they helped residents with certain aspects of their care over the past six months and if this was because the staff either did not help or made the resident wait too long. When asked if they had helped the resident with eating, 40.0% reported yes. Of those who reported yes, 9.1% reported that it was because the nursing staff either did not help or made them wait too long. When asked if they helped the resident with drinking, nearly 39% reported yes and 7.9% reported that they helped because the nursing staff did not help or made the resident wait too long. Respondents were also asked if they helped the resident with toileting and 16.4% reported yes. Just over 14% reported that they helped the resident with toileting because the nursing staff did not help or made the resident wait too long. Respondents were also asked if they helped with the care of the resident when they visited and 61.2% reported yes, while 5.5% reported that they felt the long term care home staff expected them to help. Nearly 92.7% of respondents reported that the nursing staff always or usually treated them with courtesy and respect.

Obtaining Information

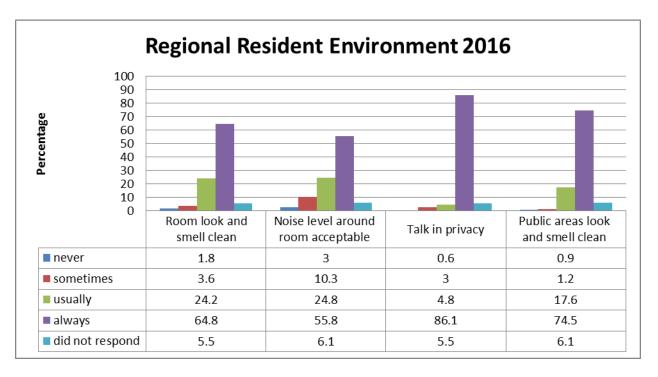
Questions about obtaining information were asked in relation to the last 6 months. Nearly 74% of respondents

reported that they wanted to get information about their family member from nursing staff and 86.9% reported they always or usually got the information as soon as they wanted. Nearly 91% reported that the nursing staff explained things in a way that was easy for them to understand and 92.1% reported that nursing staff did not ever try to discourage them from asking questions about their family member. Respondents were asked if they had asked the long term care home staff for information about payments or expenses and 20.0% reported yes. Of those asking for this information, 93.9% reported that they always or usually got all the information they wanted.

Environment

Respondents were asked to report on various aspects of the environment based on the last 6 months (See Figure 2). When respondents were asked how often the residents' room looked and smelled clean, 89% report usually or always and 92.1% reported that the public areas looked and smelled clean. Nearly 80.6% reported that the noise level around the residents' room was acceptable to them. Privacy is also an important aspect of long term care. When respondents were asked how often they were able to find places to talk to the resident in private, 90.9% reported usually or always. Respondents were also asked if they had ever seen the nursing staff fail to protect any residents' privacy while the resident was dressing, showering, bathing, or in a public area and 92.1% reported no.

Figure 2. Environment



Residents' Personal Belongings

Questions were asked related to personal belongings over the last 6 months. When asked how often residents' personal medical belongings (e.g., dentures, hearing aids, eye glasses) were damaged or lost, 60.6% reported never, 18.8% reported once, 13.9% reported two or more times, and 6.7% did not report. When asked how often the residents' clothes were damaged or lost, 52.8% reported never, 46.5% reported once or twice, and 0.7% did not indicate.

Communication

Respondents were asked several questions about overall care in the long term care facility in the last 6 months. When respondents were asked if they were ever unhappy with the care the resident received, 11.5% reported yes, 82.4% reported no, and 6.1% did not report. Of those who reported having concerns, 89.5% reported that they spoke to long term care home staff about this concern and 47.3% were usually or always satisfied with the way the staff handled these problems, and 42.1% were sometimes or never satisfied. Of those who reported having

concerns over the last 6 months, 47.3% reported that they stopped themselves from talking to any long term care home staff about their concerns because they thought staff would take it out on the resident.

Care Conferences and Involvement in Care

Nearly 81.2% of respondents reported being involved in decisions about the residents' care over the last 6 months and 80.0% reported being usually or always involved as much as they wanted to be. When respondents were asked about whether they have been part of a care conference, either in person or by telephone, over the last 12 months, 62.4% reported yes. Respondents were asked to report whether they had an opportunity to be a part of a care conference and 44.2% reported yes, 17.6% reported no, and 38.2% did not report.

Overall Care

When respondents were asked to rate the care on a scale of 0 to 10, with 0 being the worst care possible and 10 being the best care possible, the average was 8.63, the median was 9.0 and the ratings ranged from 0 to 10. Nearly 75% said they would definitely recommend the long term care home to someone needing long term care, 17.0% said probably yes, 1.8% said probably no, 1.2% said definitely no, and 5.5% did not report. Just over 52% of respondents indicated that there were usually or always enough nursing staff in the long term care home, 41.9% reported sometimes or never, and 6.1% did not report. Many comments indicated the respondents felt there was not enough staff or staff was over worked.

Other

The survey did not include questions about activities, however, respondents frequently commented on activities. Family members reported that there should be more recreational opportunities for the residents.

Opportunities for Improvement

Overall results indicate that Western Health's long term care services have many strengths including availability and kindness of nurses and their ability to handle difficult situations appropriately. Respondents also reported being satisfied with the overall care of their family member, including their treatment by staff. Other strengths include cleanliness of the physical environment, noise level, privacy, and sharing of information with next of kin/family.

Regionally, opportunities for improvement include:

- Explore ways to decrease the loss of or damage to residents' personal medical belongings (e.g., dentures, hearing aids, eye glasses) and clothing;
- Explore more effective problem solving strategies when issues arise;
- Explore opportunities to improve families' perceptions of their involvement in care through such means as care conferences;
- Explore opportunities to increase recreation activities for the residents; and
- Explore opportunities to address respondents concerns over short staffing or staff being over worked.

Appendix A

CAHPS Nursing Home Survey: Family Member Instrument

THE RESIDENT

1. Relationship to the resident named in the cover	
letter?	
☐ My Spouse/ Partner	5. Do you expect your family member to live in this or
☐ My Parent	any other nursing home permanently?
☐ My Mother-in-law/ Father-in-law	□ Yes
□ My Grandparent	□ No
□ My Aunt/ Uncle	□ Don't Know
□ My Sister/ Brother	
□ My Child	6. In the last 6 months. Has your family member ever
, □ My Friend	shared a room with another person at this nursing
□ Other (please print.)	home?
	□ Yes
2. For this survey, the phrase "family member" refers	□ No
to the resident (person) named in the cover letter.	7. Para series de la constante
Is your family member now living in the nursing	7. Does your family member have serious memory
home listed in the cover letter?	problems because of Alzheimer's disease, dementia,
□ Yes – If Yes, Go to Question 4	stroke, accident, or something else?
□ No	□ Yes
	□ No
3. Was your family member discharged from this	8. In the last 6 months, how often was your family
facility or did he or she die?	member capable of making decisions about his or
☐ Discharged – if you checked discharged, please	her own daily life, such as when to get up, what
stop completing this survey and return it in the	clothes to wear, and which activities to do?
postage paid envelope provided.	□ Never
☐ Deceased - If you family member is deceased;	□ Sometimes
we understand that you may not want to fill out a	□ Usually
survey at this time. If this is the case, please	□ Always
check the box indicating that your family member	□ Always
is deceased and return the survey in the enclosed	9. In the last 6 months, about how many times did you
envelope.	visit your family member in the nursing home?
If you would like to do the rest of the survey we	□ 0-1 time in last 6 months – Go to Question 53
•	□ 2-5 times in the last 6 months
would be very grateful for your feedback. Please	☐ 6-10 times in the last 6 months
answer the questions about your family member's	☐ 11-20 times in the last 6 months
last six months at the nursing home. Thank you for	☐ More than 20 times in the last 6 months.
your help.	
4. In total about how long has your family member	10. In the last 6 months, during any of your visits, did
lived in this nursing home?	you try to find a nurse, licensed practical nurse or
□ Less than 1 month	personal care attendant for any reason?
☐ 1 month to almost 3 months	□ Yes
□ 3 months to almost 6 months	□ No – If no, Go to Question 12
□ 6 months to almost 12 months	
□ 12 months or longer	

11.	In the last 6 months, how often were you able to find a nurse, licensed practical nurse or personal care	17. If you answered yes, was it because the nursing staff either didn't help or made him or her wait too long?
	attendant when you wanted one?	□ Yes
	□ Never	□ No
	□ Sometimes	40 to the leaf Councille of the council of the 184
	□ Usually	18. In the last 6 months, during any of your visits, did
	□ Always	you help your family member with <u>drinking</u> ? ☐ Yes
12.	In the last 6 months, how often did you see the	□ No − If No, Go to Question 20
	nurses, licensed practical nurses or personal care	19. If yes, as it because the nursing staff either didn't
	attendants treat your family member with kindness?	help or made him or her wait too long?
	□ Never	
	□ Sometimes	□ No
	□Usually	
	□ Always	20. "Help toileting" mean helping someone get on and
13.	In the last 6 months, how often did you see the	off the toilet, or helping change disposable briefs or pads.
	nurses, licensed practical nurses or personal care	In the last Consorting designs and of consorting to the
	attendants treat your family member with kindness?	In the last 6 months, during any of your visits to the
	□ Never	nursing home, did you help your family member
	□ Sometimes	with toileting?
	□ Usually	□ Yes
	□ Always	□ No − If No, Go to Question 22
14.	In the last 6 months, how often did you feel that the	21. If yes, was it because the nursing staff either didn't
	nurses, licensed practical nurses or personal care	help or made him or her wait too long?
	attendants really cared about your family member?	□ Yes
	□ Never	□ No
	□ Sometimes	22. In the last 6 months, how often did your family
	□ Usually	member look and smell clean?
	□ Always	□ Never
15	In the last 6 months, did you ever see any nurses,	□ Sometimes
13.	licensed practical nurses or personal care attendants	□ Usually
	be rude to your family member or any other	□ Always
	resident?	□ / iiii dy
	□ Yes	23. Sometimes residents make it hard for nursing staff
	□ No	to provide care by doing thing like yelling, pushing,
		or hitting. In the last 6 months, did you see any
16	In the last 6 months, during any of your visits, did	resident, including your family member; behave in a
10.	you help your family member with <u>eating</u> ?	way that made it hard for nurses or aides to
	· · · · · · · · · · · · · · · · · · ·	provide care?
	⊓ Vec	•
	☐ Yes☐ No – If No, Go to Question 18	□ Yes

24. In the last 6 months, how often did the nurses and	THE NURSING HOME
aides handle this situation in a way that you felt was	
appropriate?	30. In the last 6 months, how often did your family
□ Never	member's room look and smell clean?
□ Sometimes	□ Never
□ Usually	□ Sometimes
□ Always	□ Usually
YOUR EXPERIENCE WITH NURSING STAFF	□ Always
25. In the last 6 months, how often did the nursing staff	31. In the last 6 months, how often was the noise level
treat you with courtesy and respect?	around your family member's room acceptable to
□ Never	you?
□ Sometimes	□ Never
□ Usually	□ Sometimes
□ Always	□ Usually
	□ Always
26. In the last 6 months, did you want to get information	
about your family member from nursing staff?	32. In the last 6 months, how often were you able to find
□ Yes	places to talk to your family member in private?
□ No − If No, Go to Question 28	□ Never
27. If yes, how often did you get this information as	□ Sometimes
	□ Usually
soon as you wanted? □ Never	□ Always
— · · · · · ·	22. In the last Consumble, how after did the mublic areas
□ Sometimes	33. In the last 6 months, how often did the public areas
□ Usually	of the nursing home such as the main entrance, and
□ Always	dining rooms look and smell clean?
28. In the last 6 months, how often did the nursing staff	□ Never
explain things in a way that was easy for you to	□ Sometimes
understand?	□ Usually
□ Never	□ Always
□ Sometimes	34. In the last 6 months, did you ever see the nursing
□ Usually	staff fail to protect any resident's privacy while the
□ Always	resident was dressing, showering, bathing, or in a public
- / iiiiays	are?
29. In the last 6 months, did nursing staff ever try to	□ Yes
discourage you from asking questions about your	□ No
family member?	□ INO
□ Yes	
□No	

35. Personal medical belonging are things like hearing	CARE OF YOUR FAMILY MEMBER
aids, eye glasses, and dentures. In the last 6 months,	42. In the last 6 months, have you been involved in
how often were your family member's personal	decisions about your family member's care?
medical belongings damaged or lost?	□ Yes
□ Never	□ No
□ Once	
☐ Two or more times	43. In the last 6 months, how often were you involved a much as you wanted to be in the decisions about
36. In the last 6 months, did your family member use	your family member's care?
the nursing home's laundry service for his or her	□ Never
clothes?	□ Sometimes
□ Yes	□ Usually
□ No – If No, Go to Question 38	□ Always
37. If yes, how often were clothes damages or lost? □ Never	44. An interdisciplinary care conference is a meeting about care planning and health between a care team
□ Once or twice	and resident and his or her family.
☐ Three times or more	In the last 12 months, have you been part of an
38. At any time in the last 6 months, were you ever	interdisciplinary care conference, either in person or
unhappy with the care your family member received	by phone?
at the nursing home?	☐ Yes – If Yes, Go to Question 46
□ Yes	□ No
□ No – If No, Go to Question 42	45. Were you given the opportunity to be part of an interdisciplinary care conference in the last 12
39. In the last 6 months, did you talk to any nursing	months either in person or by phone?
home staff about this concern?	□ Yes
□ Yes	□ No
□ No – If No, Go to Question 41	46. Using any number from 0 to 10 where 0 is the worst
40. In the last 6 months, how often were you satisfied	care possible and 10 is the best care possible, what
with the way the nursing home staff handled these	number would you use to rate the care at the nursing
problems?	home?
□ Never	□ 0 Worst care possible
□ Sometimes	1
□ Usually	□ 2
□ Always	□ 3
	□ 4
41. In the last 6 months, did you ever stop yourself from	□ 5
talking to any nursing home staff about your concerns	□ 6
because you thought they would take it out on your	□ 7
family member?	□ 8
□ Yes	□ 9
⊓ No	□ 10 Rest care nossible

47. It someone needed nursing nome care, would you	53. In the last 6 months, did you help your family
recommend this nursing home to them?	member with managing finances, such as paying bills
□ Definitely No	or filling out insurance claims?
□ Probably No	□ Yes
□ Probably Yes	□ No
☐ Definitely yes	
	54. Power of attorney is a legal document that allows
48. In the last 6 months, how often did you feel that	you to make decisions about your family member's
there was enough nursing staff in the nursing home?	finances or property.
□ Never	Do you have the power to attorney for your family
☐ Sometimes	member?
□ Usually	□ Yes
□ Always	□ No
	□ Don't know
YOU AND YOUR ROLE	
Please remember the questions in this survey are	55. A substitute decision maker is a person who is at
about your experiences. Do not include the	least 19 years of age who has accepted the
experiences of other family members.	responsibility for ensuring the prior health care
,	wishes of a person, who is now incompetent, are
49. In the last 6 months, did you help with the care of	communicated to and carried out by health care
your family member when you visited?	providers. If an individual had not appointed a
□ Yes	substitute decision maker, legislation identifies a list
□ No	of persons who may act in this capacity. Regardless
•	of the relationship, a person can act as a substitute
50. Do you feel that nursing home staff expect you to	decision-maker only if they have had personal
help with the care of your family member when you	involvement with the incompetent person in
visit?	the preceding twelve months. In the past, the
□ Yes	substitute decision maker has been referred to as the
□ No	next of kin.
51. In the last 6 months, did you ask the nursing home	Are you your family member's substitute decision
for information about payments or expenses?	maker (next of kin)?
□ Yes	□ Yes
□ No – If No, Go to Question 53	□ No
	□ Don't know
52. In the last 6 months, how often did you get all the	
information you wanted about payments or	56. What is your age?
expenses?	□ 18 to 24
□ Never	□ 25 to 34
☐ Sometimes	□ 35 to 44
□ Usually	□ 45 to 54
□ Always	□ 55 to 64
	□ 65 to 7/

□ 75 or older	62. How did that person help you?
57. Are you male or female?	$\hfill\Box$ Read the questions to me
□ Male	□ Wrote down the answers I gave
□ Female	□ Answered the question for me
58. What is the highest grade or level of school that you	☐ Translated the questions into my language
have completed? Grade school or some high school Completed high school Post-secondary technical school Some university or college Completed college diploma Completed university degree Postgrad degree (Master's or Ph.D.)	63. Considering all of the people who visit your family member in the nursing home, are you the person who has the most experience with his/her care? Yes No Don't know
59. Would you say you are White/ Caucasian Aboriginal Other If other, please specify	at this nursing home could be improved? If so, please explain.
50. What language do you mainly speak at home? English French Other If other, please specify	Please return the completed survey in the postage-paid envelope. Thank you for completing this survey. Your opinions are important to us.
□ No – Go to Question 64	

Appendix B

Family Comments

- 1. Bigger rooms, visiting places.
- 2. A secure outside area (eg. park, bench area) for residents to enjoy in safety.
- 3. Check to see if they need to be changed more often.
- 4. Get out a bit more.
- 5. I think they need to look at is for front-line staff should be more aware of basic information of their resident and should not send the family member to other workers for help (such as social workers). They should maintain one staff member on the floor and not just being the desk in the offices (such as in protective) and doing so would make family members feel more secure about their loved ones being watched and cared for. Regulations regarding visitors to the home should be made more readily available to visitors. When an incident occurs and the family member is called the notes regarding are too vague to articulate what happened with the resident. Also lack of communication about these events between nursing staff, such as nursing staff being unaware of an incident when it occurs and when it is brought up by a family member.
- 6. More nursing staff or personal care attendants to help ease the workload. More recreational activities for the residents (such as musical entertainment and conversation partners).
- 7. More physiotherapy for stroke victims and more therapy in general to promote residents' independence. Urine smell within the family member's room needs to be removed.
- 8. More staff.
- 9. My recommendation is that there should be more staff and that there should be more one on one time to interact with residents especially those with Alzheimer's disease and dementia.
- 10. Pets should be allowed (pet therapy), it helps residents.
- 11. Residents should have more recreational activities for them.
- 12. Would prefer that the men and women were separated on Protective Care. Feels there is potential for sexual misconduct with males and females who are incompetent and openly sharing the same space.
- 13. The one complaint I have is that they have stopped ironing my father's clothing. This is not acceptable since he has never gone without his clothes ironed. He wears dress shirts, dress, or cotton pants, and cardigans and it looks terrible to see it not ironed. I have complained on this matter and the answer is that it is standard- well I feel standards should always be raised, not downgraded. On my complaint, I wrote that "wrinkled faces, wrinkled minds, wrinkled clothes- who cares." I still feel this way and if I had time I would protest, maybe in front of the building with a sign but I am also caring for my mother so time is not mind.
- 14. I believe more staff is required. Many times residents are left without supervision while staff attend to the needs of other residents in their rooms. This can be dangerous for patients with Alzheimers.
- 15. I do not mind giving my name if needed.
- 16. I would like for the home to bring back the ironing of my husband's clothing as I find it very wrinkled now.
- 17. My father's personal care is very well done. Any issues we have are his, not of the personal staff.
- 18. We are happy with Dad's care.
- 19. Would like to have her husband to have regular physio as was promised.

- 20. Don't always smell nice; only one phone line for four people.
- 21. Could use 4 bathrooms instead of 2.
- 22. Full time recreational therapist (one, preferably 2). Heating system in bungalow 1 needs to be checked more staff (cleaning) dusting needs to be done.
- 23. Home needs a physical program- very big concern one bathroom for 5 people is not enough. Understaffed, residents need more one on one time for recreation.
- 24. Lost a lot of clothes.
- 25. More than one person working at night.
- 26. Not always clean, especially in winter lots of issues with clothes being lost.
- 27. The food is not up to par. Rooms are not cleaned often enough or thoroughly. Not enough personal hygiene. Heating can break down unnoticeably and makes residents really cold (no thermostats in rooms), been down to 19 degrees.
- 28. Understaffed at night. Need for social events.
- 29. More staff is needed. I cannot stress this enough. More communication with the next of kin other than the patients themselves as their memory is not the best at times.
- 30. During report at night the staff are usually confined to one room with no one on the unit with the residents.
- 31. I feel this facility is a great place for our loved ones. They are well taken care of there but the shortage of staff make it difficult for the staff to spend any quality time with the residents.
- 32. Lots of times my mom smells terrible from not cleaning herself properly, that's because the nursing home is under staffed. There have been times when I visit after supper I can't sit beside her. The residents only have one bath per week as far as I know and again, under staffed!
- 33. My mother is receiving excellent care but I do feel the staff is overworked.
- 34. Not enough care given to people who cannot help themselves.
- 35. She needs her bed cleaned and done more often. Every time we come she is on a mattress with no sheets and she should be checked on more often. Her room always smells terrible. The only complaint I would have regarding my parent is the lack of hairdressing services. The rec. therapy worker does hair care daily, ie. Styling the residents' hair. When she's off (on vacation or sick leave), no one is available to do the residents' hair. This may seem trivial, but it makes a huge difference when families and friends visit and the resident's hair is in a terrible state. It's so much nicer to see their hair combed and styled as they would have it at home.
- 36. There are not enough staff to cover nursing staff breaks, residents have to wait for staff to return to get any care during these times. Staff are over worked and tired and this is affecting the level of care they can provide.