Regional Long Term Care Resident Experience Survey Results 2021



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Background

Long Term Care at Western Health

Long Term Care (LTC) provides quality institutionally based programs and services within three LTC homes, four Protective Community Residences and four Rural Health Centers. LTC staff work collaboratively with other branches of Western Health in the planning, delivery, and monitoring of LTC programs and services. An interdisciplinary, collaborative model of care is important for delivery of quality LTC programing. Nursing, Social Work, Physiotherapy, Occupational Therapy, Behavior Management, Physicians, Pharmacy, Therapeutic Recreation, and Spiritual Care are all integral parts of the interdisciplinary team within LTC programs and services. In 2020/2021, LTC developed a new Regional LTC Quality Improvement Team composed of residents, family members, clinical staff, and support staff from various LTC sites in the region. As part of Western Health's commitment to quality improvement for residents and their families, it is important to measure resident and family experience. The Quality Improvement Team reviewed and provided input on modifications to the LTC Resident and Family Experience Surveys. The Team, and LTC sites, will use the survey results to guide quality improvement initiatives.

Impact of COVID-19 Pandemic

The World Health Organization declared COVID-19 a global pandemic on March 11, 2021, the world faced profound economic and social impacts. Within Western Health, 2020/2021 was an exception year in many ways. The effects and implications of the pandemic affected all sites, services, and programs throughout the year. LTC residents, families and staff were impacted by many changes in staffing and safety protocols, resident and visitor screening practises, personal protective equipment, program delivery, and visitor restrictions.

Survey Instrument

The validated Consumer Assessment of Healthcare Providers and Systems (CAHPS) Nursing Home Survey: Resident Instrument, developed by Alberta Health Services, was utilized as the basis for the survey administered to LTC residents throughout the Western region. Based on experiences using this survey within Western Health in 2010 and administering a modified version in 2013 and 2015/16, this survey tool was modified in collaboration with the Regional LTC Quality Improvement Team. Questions were modified to fit with current language and terminology for services and providers, to ask about additional services and providers, as well as to help assess the impact of the COVID-19 pandemic on resident experience. This modified tool (Appendix A) was used to evaluate resident experiences and administered electronically through the Get Feedback online survey platform.

Method

The LTC Resident Experience Surveys were administered face-to-face from May 3 to June 25, 2021. Due to visitor restrictions, volunteers were not able to be utilized for survey administration. However, sites used a combination of staff, students, and nurses on ease-back to administer and transcribe the surveys. Western Health promoted the LTC Resident Experience Survey broadly on the organization's website and social media pages. The Resident Survey was also promoted within the Family Survey promotions and families were encouraged to assist their family members with completion, if preferred.

Participants

The health care team for each LTC facility/floor throughout Western Health determined which LTC residents were able to complete the survey. A list of residents able to complete the survey was compiled by each team and provided to those responsible for administering the survey. All residents listed were given the opportunity to participate.

Sample

Surveys were administered to 150 resident participants regionally. The total occupancy of all LTC sites in the region was 548 at the time of the survey. This sample size provides a confidence level of 85% that the real values are within ±5% of the measured values.

Privacy, Confidentiality, and Data Security

Privacy and confidentiality were achieved as the residents names were not reported on the surveys. The electronic survey reports are stored in a password-protected account on the Get Feedback online platform. Any information that could potentially identify the residents was deleted. All downloaded data was stored on a password protected computer in the Monaghan Hall office used by Quality staff.

Data Analysis

Survey data was entered directly into Get Feedback by the respondent or transcribed from paper copies by the survey administrators. Reports were developed and analyzed in this survey platform. Descriptive statistics were calculated to obtain a general perspective of residents' experiences with LTC services at Western Health. The not applicable and I don't know/I am unsure responses were removed from calculations to provide a more accurate representation of the measures. Comments were compiled based on common themes. Statistics were also filtered for each site or grouping of sites where the sample provided sufficient data to assist in quality improvement initiatives. Comparisons to the 2016 results must consider that the 2021 residents are not the same individuals who were residing in LTC in 2016. The following report provides survey results for the region.

Results

Demographics

A total of 150 surveys were completed across all LTC sites in the region. This is a significant increase in sample size from the 88 residents who participated in the 2016 survey, compared to an increase in occupancy by 75 beds. The majority of respondents were from Corner Brook Long Term Care (37%), Bay St. George Long Term Care (26%), and Western Long Term Care (18%). In combination, 19% of the respondents were from the four Rural Health Centres. There were no residents in the Protective Community Residences able to complete the survey.

To gain a more thorough understanding of the demographics of the LTC residents, respondents were asked for their age, gender, race or ethnicity, and whether they had difficulty with the English language. Of the 145 residents who reported their age, 10% were 95+, 37% were 85-94, 27% were 75-84, 15% were 65-74, and 10% were 64 and under. Females accounted for 62% and males accounted for 38%. The majority of respondents identified as white/Caucasian (95%) and 5% identified as Indigenous/Aboriginal. Of the respondents, 89% reported not having difficulty with the English language, 6% reported having difficulty, and 5% reported having some difficulty. These results show changes in the demographics within LTC, as the 2016 survey did not have any respondents identify as Indigenous/Aboriginal and only 1.1% identified difficulty with the English language.

Residents were also asked about highest level of school completed, whether they had a roommate, and if they had help with survey completion. Of the respondents, 61% reported having grade school or some high school, 19% reported having completed high school or having a GED, 8% reported having post-secondary technical school, 4% reported having some university or college, 4% completed a college diploma, 3% completed a university degree, and 1% completed a post-graduate degree. Of the respondents, 28% had a roommate and 72% reported not having a roommate. When asked about support with survey completion, 99% of the respondents had assistance, with the most common assistance being 'read the questions to me' (94%) and 'recording the answers I gave' (87%). Again, this shows change in the characteristics of the LTC residents, with a significant increase in educational experience, with 39% of respondents having completed secondary or higher level education, compared to 18.2% in 2016.

Meals

Residents were asked to rate food and dining experience on a scale of 0-10 (with 10 being the best possible). On average, respondents rated meal quality at 7.47, an increase from 7.11 in 2016. Food taste was rated 7.25 and food temperature was rated 7.33. When asked how the pandemic has impacted their satisfaction with the meals provided, 89% of

respondents reported no change, 2% reported being somewhat more satisfied, 4% reported they were significantly more satisfied, 4% reported being somewhat less satisfied, and 1% reported being significantly less satisfied. A common theme from several residents' comments was a concern with food being cold. The comments and ratings indicate that there has been improvement in food quality to date and there is opportunity for continued improvement in the meal quality.

Those who eat in the dining room (or communal area), were asked how they would rate their mealtime enjoyment. The average rating was 8.31, an increase from 8.14 in 2016. When asked how the pandemic has impacted their satisfaction with the mealtime experience (such as the dining room), 83% of respondents reported no change, 2% reported being somewhat more satisfied, 5% reported they were significantly more satisfied, 9% reported being somewhat less satisfied, and 1% reported being significantly less satisfied. Several respondents commented about enjoying the communal dining experience. Another resident indicated they had been unaware of the option for communal dining and noted this would be very nice. Some residents also commented about missing and being unhappy with not eating in the common area due to changes.

The results of this survey indicate overall improvements in meals and mealtime experience and some negative impacts of changes to mealtime experience. The survey results support the potential benefit of ensuring a communal dining experience where possible.

Environment

Respondents were asked to rate the home in relation to temperature and cleanliness. On average, respondents rated the temperature at 7.64 (range 0-10). This is an increase from a rating of 7.06 in 2016. Several residents commented that the temperature can be cold, more commonly at night. However, preferred temperatures vary greatly and another respondent commented that the front temperatures were too warm. On average, respondents rated cleanliness at 9.3, no change from 2016. When asked how the pandemic has impacted their satisfaction with the cleanliness of the LTC home, 71% of respondents reported no change, 14% reported being somewhat more satisfied, 13% reported they were significantly more satisfied, 1% reported significantly less satisfied, and no one (0%) reported being somewhat less satisfied.

Respondents were asked to indicate whether the area around their room was quiet at night and 84% reported yes, 6% reported no, and 11% reported sometimes. Comments from residents included several concerns about noise, mainly at night. One comment to be considered was that staff can be loud when outside on break early in the morning. The majority of respondents reported that they were not bothered by noise during the day (80%), 9% reported that they were, and 12% reported sometimes. Privacy is also an

important component of environment. When respondents were asked if they could find a place to visit in private if they had a visitor, 95% reported yes, 4% reported no, and 2% reported sometimes. Respondents were also asked to indicate how safe and secure they felt in the home, and on average respondents reported 8.88, which is a decrease from 9.34 in 2016.

Medication

When asked if they take any medicine (prescribed or Aspirin/Tylenol) to help with aches or pain, 71% of respondents indicated that they took some medication, while 21% said they did not and 10% were not sure. Of the 71% who indicated using pain medication, respondents rated the medicine at 7.93 (range 0-10) in how well it worked to help with aches or pain. This was an increase from a rating of 7.6 in 2016. On average, respondents rated how well staff helped them when they had pain at 8.77 (range 0-10), an increase from 7.9 in 2016.

Resident Care

Residents were asked to indicate the rating they would give for the overall care they receive from all the LTC staff. Respondents rated overall care as 8.97 out of 10. This is a slight decrease in satisfaction from a rating of 9.2 in 2016. When asked how the pandemic has impacted their satisfaction with their overall care, 85% of respondents reported no change, 4% reported they were significantly more satisfied, 3% reported somewhat more satisfied, 8% reported somewhat less satisfied, and no one (0%) reported being significantly less satisfied.

Residents were asked to indicate if they get the care they need in the LTC home. The majority (86%) reported yes, while 11% reported sometimes and 3% reported no. Ninety two percent of respondents reported that staff helped them to dress, bathe, shower, or go to the toilet. Residents were also asked if they sometimes needed help from staff to stay clean. Of the respondents, 92% reported yes, 4% reported sometimes, and 4% reported no. Respondents who needed help were asked if they received the help they needed to stay clean and the majority (94%) reported yes, while 6% reported sometimes and no one (0%) reported no. When respondents were asked whether they were left sitting or lying in the same position for so long it hurt, 15% of respondents reported yes, 13% reported sometimes and 72% reported no. A common theme in the resident comments centered on resident cares being rush or delayed, as well as sometimes rough. Several respondents also commented on staff not answering the buzzer or responding to requests for help in a timely manner and suggested staff need to check on residents more frequently. A contrasting theme also emerged with several residents providing positive feedback about staff in various departments, reporting that staff are always there to help, describing them positively, and expressing that care has surpassed expectation.

Respondents were also asked to indicate if the staff made sure they had enough personal privacy when they dressed, showered, or bathed and 95% indicated yes, while 3% indicated sometimes, and 2% reported no. This shows an increase in protection of personal privacy from 2016, when 78.4% reported yes, 8.0% reported no, and 13.6% did not report.

Several rating questions were asked about the care residents received in relation to gentleness, respect, listening, and explaining things in a way the residents could understand (see Table 1). While there were some decreases in ratings from 2016, the majority of residents rated aspects of resident care highly.

Table 1. Resident Care (Range 0-10; 10 being best possible)

Aspect	2016	2021
Gentleness of staff	8.18	8.64
Respectfulness of staff	9.51	8.87
Staff listen	8.87	8.41
Staff explain things in a way that is easy to understand	8.88	8.49
Overall rating of care from all staff	9.21	8.97

Respondents were asked to indicate how often they were satisfied with the care they received from each of the programs/disciplines providing care (Table 2). Not applicable ratings were removed to indicate satisfaction of those who had experience with each service. While respondents reported some levels of dissatisfaction with each service, the majority reported being usually or always satisfied with each service.

Table 2. Resident Satisfaction with Services (% of respondents: not applicable removed)

Program/Discipline	Never	Sometimes	Usually	Always
Nursing Staff	2%	11%	25%	63%
Nurse Practitioner/Doctor	6%	16%	22%	56%
Occupational Therapy	11%	9%	18%	62%
Physiotherapy	9%	9%	19%	63%
Recreation Therapy	2%	12%	14%	73%
Social Work	7%	18%	18%	57%
Spiritual Care	2%	18%	14%	65%

When asked how the pandemic has impacted their satisfaction with access to health care staff, 1% of respondents reported being significantly less satisfied, 6% reported being somewhat less satisfied, 84% reported no change, 6% reported being somewhat more satisfied, and 3% reported they were significantly more satisfied. When asked how the pandemic has impacted their satisfaction with access to programs and treatments, 2% of respondents reported being significantly less satisfied, 11% reported being somewhat less satisfied, 79% reported no change, 5% reported being somewhat more satisfied, and 3% reported they were significantly more satisfied.

Respondents were asked if they visited a doctor or nurse practitioner for medical care outside or inside the LTC home. Of the respondents, 26% reported visiting a doctor or nurse practitioner outside the LTC home and 79% reported visiting one inside the LTC home. When asked if a doctor or nurse practitioner was available when they need one, 75% of respondents reported yes, 18% reported sometimes and 7% reported no.

The survey results indicate potential opportunities for improvement in responses to resident requests/buzzers, frequency of resident checks, and frequency of resident repositioning.

Activities and Visitation

When asked if they were satisfied with how they spent their time in the LTC home, the majority of respondents (74%) reported yes, 18% reported sometimes, and 8% reported no. This indicates a decrease in satisfaction with how they spent their time compared to 2016, when nearly 84% reported yes, 10.2% reported sometimes, 4.5% reported no, and 1.1% did not report. When asked how the pandemic has impacted their satisfaction with their access to activities, 5% of respondents reported being significantly less satisfied, 15% reported being somewhat less satisfied, 72% reported no change, 3% reported being somewhat more satisfied, and 4% reported they were significantly more satisfied. A common theme in residents' detailed comments was the importance of access to music and singing.

Residents were asked if the visitor restrictions put in place during the last six months had changed their in-person visits with their loved ones and responses received were very polarized. Of the respondents, 48% indicated some or significant decrease, while 45% indicated no change and 7% indicated some or significant increase. To further understand the impact of the pandemic-related visitor restrictions, residents were asked if they had enough in-person visits to meet their needs. Of the respondents, a significant majority (70%) reported that they did have enough visits to meet their needs, while 13% reported no, 13% reported sometimes, and 3% reported that they did not have in-person visits. A common theme in residents' responses centered on the importance of visitors and that

residents missed the prior frequency of visits with loved ones and ministers, as well as with friends on other floors.

Residents were asked about frequency, purpose, and satisfaction with virtual visits, which were defined as talking on the phone or having video calls (Face Time, Google Duo, etc.). Of the respondents, 58% reporting having virtual visits and 42% reported they did not have virtual visits. Of those who had virtual visits, 35% reported daily visits, 19% reported several times per week, 19% reported weekly, 14% reported having visits several times per month, and 13% monthly or less. When those who had virtual visits were asked to indicate all reasons (check all that apply) for their virtual visits, 68% reported that they had virtual visits to connect with loved ones who could not visit in-person due to restrictions and 48% had virtual visits to have additional contact with loved ones between their in-person visits. In addition, 73% of respondents reported that they had virtual visits to connect with loved ones who live far away. When asked if they had enough virtual visits to meet their needs, 87% of respondents reported yes, 3% reported no, and 10% reported sometimes. Respondents indicated a high level of satisfaction with virtual visits and a significant portion used virtual visits to connect with loved ones who live far away. This shows a significant potential for virtual visits to be of benefit as a long term initiative.

Residents were asked if there were enough activities for them to do on the weekends and 10% reported yes, 62% reported no, 9% reported sometimes, and 19% did not report. This indicates a decrease in satisfaction with weekend activities from 2016, when 34.1% reported yes, 40.9% reported no, 13.6% reported sometimes, and 11.4% did not report. Likewise, there was a decrease in satisfaction with activities during the week. When asked if there were enough activities during the week, 59% reported yes, 10% reported no, 12% reported sometimes, and 19% did not report. In comparison, 69.3% of respondents reported yes, 9.1% reported no, 9.1% reported sometimes, and 12.5 did not report in 2016.

The survey results highlighted the importance of supporting visitors to be present as much as feasible and safe. The results of the survey indicate opportunities for improvement in the activities available to residents during the week and weekends, with an emphasis on the importance of music.

Autonomy and Control

Respondents were asked about decision making and whether they chose what time they went to bed, clothes they wore and activities in which they participated (Table 3).

Table 3. Choices (% of respondents)

Choice	Yes	Sometimes	No
Bed time	80%	11%	9%
Clothes	83%	6%	11%
Activities	88%	6%	6%

When respondents were asked about their ability to move around alone (not in a wheelchair), 25% of respondents reported yes and 75% reported no. When asked if they were able to move their arms to reach then things that they want, 80% or respondents reported yes, 11% reported sometimes, and 9% reported no. When asked if they could reach the call button by themselves, 93% of respondents reported yes, 3% reported no, and 4% reported sometimes. When asked if there was a pitcher of water or something to drink where they could reach it by themselves, 81% of respondents reported yes, 13% reported no, and 6% reported sometimes.

Respondents were asked if they were ever unhappy with the care that they get at the LTC home and the majority (75%) reported no, while 7% reported yes and 18% reported sometimes. While this indicates some residents have dissatisfactions with their care, respondents also felt they had opportunity to bring forward their concerns. When asked if they feel free to speak up to staff when they are unhappy with their care, 85% reported yes, 8% reported sometimes, and 6% reported no.

Health and Wellness

When respondents were asked to rate how they felt about their life overall (0 being the worst possible and 10 being the best possible), on average they rated their lives at 7.17, a slight decrease from 7.32 in 2016. When asked how the current pandemic has changed how they feel about their lives, 4% reported a significant negative change, 26% reported some negative change, 63% reported no change, 7% reported some positive change, and no one (0%) reported significant positive change. Residents were asked to indicate how they would rate their overall health. Of the respondents, 9% reported excellent, 25% reported very good, 39% reported good, 21% reported fair, and 6% reported poor. This shows some shifts with an overall improvement in health rating compared to 2016, when 1.4% of respondents reported excellent, 25% reported very good, 27.3% reported good, 15.9% reported fair, 19.3% reported poor, and 1.1% did not report.

Residents were asked to indicate how they would rate their overall mood or emotional wellbeing. Of the respondents, 9% reported excellent, 41% reported very good, 34% reported good, 11% reported fair, and 3% reported poor. Residents were asked to indicate how their mood had changed because of the pandemic. Of the respondents, 62% reported

no change, 22% reported a little worse, 13% reported significantly worse, 2% reported a little better, and 1% reported significantly better.

Respondents were also asked to indicate how often they felt worried, happy, bored, and lonely (Table 4). Most respondents reported being happy often or sometimes (92%), which was a small increase from 89.8% in 2016. However, compared to 2016, a larger percentage of respondents also reported often or sometimes being worried (48% from 32.8%), bored (48% from 42%), and lonely (70% from 51.2%).

<u>Table 4. Emotions (% of respondents)</u>

Emotion	Often	Sometimes	Rarely	Never
Нарру	64%	28%	6%	3%
Worried	14%	34%	12%	40%
Bored	12%	36%	28%	23%
Lonely	23%	47%	14%	16%

Future Planning

Respondents were asked whether they had a discussion with family or a close friend about what healthcare treatment they wanted or did not want if they became ill and could not speak for themselves. Of the respondents, 55% reported yes, 25% reported no, and 20% reported I don't know/I am unsure. When asked if they ever had a discussion with a healthcare professional or long term care staff about what healthcare treatment they wanted or did not want if they became ill and could not speak for themselves, 45% reported yes, 28% reported no, and 27% reported I don't know/I am unsure. When asked how important they felt it was to have this kind of discussion with a healthcare professional or long term care staff, 7% of respondents reported extremely important, 57% very important, 26% somewhat important, 8% not very important, and 2% reported not at all important.

Overall

When asked to rate the LTC home, on average, respondents rated the home at 8.4 (range 0-10; 0 being the worst possible and 10 being the best possible). This is a slight decrease from an overall rating of 8.7 in 2016. When respondents were asked whether they would recommend their LTC home to others, 67% reported definitely yes, 20% reported probably yes, 4% reported probably no, and 9% reported definitely no. This is a decrease from 2016, when 78.4% reported definitely yes, 11.4% reported probably yes, 3.4% reported probably no, 5.7% reported definitely no, and 1.1% did not report.

Residents were also asked if they felt that the protocols and restriction put in place during the pandemic have worked to keep them safe from getting COVID-19. Of the respondents, 64% reported definitely yes, 30% reported probably yes, 4% reported probably no, and 2% reported definitely no.

Strengths and Opportunities for Improvement

Overall results indicate that Western Health's Long Term Care services have many strengths including the overall respect, communication and gentleness of staff with residents and the availability of a physician or nurse practitioner when needed. Residents reported feeling safe and secure, feeling free to speak up to staff when they are unhappy with their care, having privacy when visitors visit, and enjoying mealtime in the dining room. Residents also indicated an overall high satisfaction with aspects of the environment including cleanliness, safety, and noise.

The survey identified the following areas to explore for opportunities for improvement:

- · Meal quality and dining experience;
- Response time for resident requests and buzzers, frequency of resident checks, and frequency of resident repositioning;
- Access to in-person and virtual visitation;
- Availability and choices of activities on the weekends and during the week, with a consideration of the importance of access to music;
- Supports to address residents' worry, boredom, and loneliness; and
- Supports for residents to plan their future wants and needs if they become ill and cannot speak for themselves.

Appendix A

Western Health Long Term Care Resident Experience Survey

Long Term Care Resident Experience Survey

As someone living in long term care, we are asking for your help. We are doing a survey in an effort to understand how you view your experience of living in long term care. Any information that you decide to share will help us identify areas for improvement. Western Health will post a summary of the information from all residents who respond on our website at www.westernhealth.nl.ca. This report will be available in September 2021.

If you prefer to complete the survey electronically, it is available here: www.westernhealth.nl.ca/survey

Your participation in this survey is voluntary and will not affect your health care. We have prepared the survey to be anonymous and will not identify you as a participant. Your participation is greatly appreciated.

If you have any questions about the survey, please call Tracey Wells-Stratton, Regional Manager Research and Evaluation at (709)784-8601, or email her at traceywells@westernhealth.nl.ca.

Thank you for helping to improve long term care in the Western region.

1.	Site:												
	Mark only one	oval.											
	Dr. Charle	s L Le	Grow He	ealth Ce	ntre (Po	ort Aux E	Basques	1)					
	Calder He	alth Ca	re Centi	re (Burg	eo)								
	Bay St. Ge	eorge L	ong Ter	m Care	Centre	Stepher	nville Cr	ossing)					
	Corner Br	ook Lor	ng Term	Care (C	orner B	lrook)							
	Protective	Comm	unity R	esidenc	es (Cor	ner Broo	ok)						
	Western L	ong Te	rm Care	(Corne	r Brook)							
	Bonne Ba	y Healt	h Centre	(Bonne	Bay)								
	Rufus Gui	nchard	Health	Centre (Port Sa	unders)							
2.	Overall, how w	rould y	ou rate	this L	TC Hor	ne? 0 i	s the w	orst po	ossible	& 10 is	the be	st pos	sible
	Mark only one or	ral.											
		0	1	2	3	4	5	6	7	8	9	10	
	Worst possible	0	0	0	0	0	0	0	0		0	0	Best possible

3. Please rate the following aspects of the LTC home. 0 is the worst possible & 10 is the best possible. Please write in the number would you use to rate the following:

How comfortable is the temperature in the LTC home?

How clean is this LTC home?

How safe and secure do you feel in this LTC

4. What number would you use to rate the food and dining experience at this LTC Facility? 0 is the worst possible & 10 is the best possible. Please write in the number you would use to rate the following:

O - 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 - 10 N/A

Overall, how would you rate the food?

How would you rate the food's taste?

How would you rate the food's temperature?

If you eat in the dining room (or communal area), how would you rate how much you enjoy mealtimes?

5. Now think about all the different kinds of medicine that help with aches or pain. This includes medicine prescribed by a doctor or nurse practitioner, as well as aspirin and tylenol. Do you ever take any medicine to help with aches or pain?

Mark only one oval.

O Yes

home?

◯ No

I don't know / I am not sure

	0-1-2-3-4-5-6-7-8-9-10
How well the medicine worked to help with aches or pain	
How well the staff help you when you have pain	
Do the staff make sure you have enoug bathe? Mark only one oval. Yes No	gh personal privacy when you dress, take a shower, or
	ving: to dress, bathe, shower, or go to the toilet?
Mark only one oval. Yes No	
O is the worst possible & 10 is the best pentle the staff are when they are helpi	

10. 0 is the worst possible & 10 is the best possible. Please write in the number would you use to rate the following:

	0 - 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 - 10
How respectful the staff are to you?	
How well the staff listen to you?	
How well the staff explain things in a way that is easy to understand?	

11. How often are you satisfied with the care you receive from the following services/providers?

Mark only one oval per row.

The overall care you get from all the staff?

	Never	Sometimes	Usually	Always	N/A
Nursing Staff	\bigcirc				
Nurse Practitioner / Doctor	\bigcirc			\bigcirc	\bigcirc
Occupational Therapy	\bigcirc			\bigcirc	\bigcirc
Physiotherapy	\bigcirc				
Recreation Therapy	\bigcirc				\bigcirc
Social Work	\bigcirc			\bigcirc	\bigcirc
Spiritual Care					

12.	Please	respond	to	the	following	with	yes,	no,	or	sometimes.
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Mark only one oval per row.

Yes No Sometimes

Is the area around your room quiet at night?

Are you bothered by noise during the day?

If you have a visitor, can you find a place to visit in private?

Do you visit a doctor or nurse practitioner for medical care outside the LTC home?

Do you see any doctor or nurse practitioner for medical care inside the LTC home?

Is a doctor or nurse practitioner available to you when needed?

Do you have any additional comments you would like to share about your exthe LTC facility and the care you receive? If so, please explain:

13.	Do you have any additional comments you would like to share about your experience with the LTC facility and the care you receive? If so, please explain:							

14. Are you able to move around alone - not in a wheelchair?

Mark only one oval.

Yes Skip to question 16

○ No

Mark only one oval. Yes No Sometimes Are you able to move your arms to reach things that you want? Mark only one oval. Yes No Skip to question 18 Sometimes We'd like to find out about whether you can reach the things you need to in you mark only one oval per row. Yes No Sometimes Can you reach the call button by yourself? Is there a pitcher of water or something to drink where you can reach it by yourself?	Are you ever left sitting or	idying in			1011 50 101	ng that it ha	rts?
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	Mark only one oval per row.					30011	
	Mark only one oval per row. Can you reach the call button Is there a pitcher of water or a drink where you can reach it be	by yourse something by yourself	elf? g to f?	Yes	No O	Sometimes	
We'd like to know about choices you can make for yourself at this LTC home. Ca choose:	Mark only one oval per row. Can you reach the call button Is there a pitcher of water or a drink where you can reach it b We'd like to know about ch	by yourse something by yourself	elf? g to f?	Yes	No O	Sometimes	
We'd like to know about choices you can make for yourself at this LTC home. Ca choose: Mark only one oval per row.	Mark only one oval per row. Can you reach the call button Is there a pitcher of water or a drink where you can reach it b We'd like to know about ch choose:	by yourse something by yourself	elf? g to f?	Yes	No O	Sometimes	
choose:	Mark only one oval per row. Can you reach the call button Is there a pitcher of water or a drink where you can reach it b We'd like to know about ch choose:	something by yourself	elf? g to f? u can ma	Yes	No O	Sometimes	
choose: Mark only one oval per row.	Mark only one oval per row. Can you reach the call button Is there a pitcher of water or a drink where you can reach it b We'd like to know about ch choose: Mark only one oval per row.	something by yourself	elf? g to f? u can ma	Yes	No O	Sometimes	
choose: Mark only one oval per row. Yes No Sometimes	Mark only one oval per row. Can you reach the call button Is there a pitcher of water or a drink where you can reach it b We'd like to know about ch choose: Mark only one oval per row. What time you go to bed?	something by yourself	elf? g to f? u can ma	Yes	No O	Sometimes	

23/2021				Long Term Care I	Resident Experience Survey
19.	Are there enough	organize	ed activit	ies for you to	do:
	Mark only one oval p	er row.			
		Yes	No	Sometimes	
	On the weekends?	0	0		
	During the week?	0	0	0	-
20.	Over the past 6 m needs?	onths, di	d you ha	ve enough vi	sits with someone in-person to meet your
	Mark only one oval				
	Yes				
	◯ No				
	Sometimes				
	Did not have in	n-person v	visits		
21.	Did the visitor rest	rictions	nut in ni	ace during th	e last 6 months change your in-person visits
21.	with loved ones?	rictions	putinipi	ace during th	e last o months change your in-person visits
	Mark only one oval				
	Significant de	crease			
	Some decreas	e			
	No change				
	Some increase	e e			

Significant increase

22.	In the last 6 months, how often did you have 'virtual visits' with your loved ones: talked on the phone or had video calls (FaceTime, Google Duo, etc.)?
	Mark only one oval.
	Daily
	Several times per week
	Weekly
	Several times per month
	Monthly or less
	Did not have virtual visits Skip to question 26
23.	Why did you have virtual visits?
	Check all that apply.
	To connect with loved ones who live far away
	To connect with loved ones who could not visit in-person due to visitation restrictions
	To have additional contact with loved ones between their in-person visits
24.	Did you have enough virtual visits to meet your needs?
	Mark only one oval.
	Yes
	No.
	Sometimes
25.	Do you have any additional comments you would like to share about your experience with
20.	activities and visits at the LTC home? If so, please explain:

Lonely

3/2021				Long	Term Care R	esident Experience Survey
26.	Would yo	u recom	mend this LT	C home	to others?	
	Mark only	one ova	al.			
	O Defi	initely no				
	Prol	bably no				
	Prol	bably yes				
	O Defi	initely yes	3			
27.	In genera	l, how w	ould you rate	e your ove	erall mood	or emotional well-being?
	Mark only	one ova	al.			
	Exc	ellent				
	◯ Very	y good				
	Goo	d				
	Fair					
	Poo	г				
28.	How ofte	n do you	u feel the follo	owing he	re in the L	TC home:
	Mark only	one oval į	per row.			
		Often	Sometimes	Rarely	Never	
	Worried					
	Нарру					
	Bored					

2	Has your mood or emotional wellbeing cl	nanged be	ecause o	f the current	pandemic?
	Mark only one oval.				
	Significantly worse				
	A little worse				
	No change				
	A little better				
	Significantly better				
3	0. In general, how would you rate your over	all health?	?		
	Mark only one oval.				
	Excellent				
	Very Good				
	Good				
	Fair				
	Poor				
3	For the following questions, please answ.	er ves. no	. sometir	nes, or not a	oplicable
3	For the following questions, please answer Mark only one oval per row.	er yes, no	, sometir	nes, or not ap	pplicable
3	For the following questions, please answer Mark only one oval per row.	er yes, no Yes	, sometir No	nes, or not ap	
3					Not applicable
3	Mark only one oval per row. Are you satisfied with how you spend your				
3	Mark only one oval per row. Are you satisfied with how you spend your time at this home? Are you ever unhappy with the care you get				
3	Mark only one oval per row. Are you satisfied with how you spend your time at this home? Are you ever unhappy with the care you get at this home? Do you feel free to speak up to staff when				
3	Are you satisfied with how you spend your time at this home? Are you ever unhappy with the care you get at this home? Do you feel free to speak up to staff when you are unhappy with your care?				
3	Are you satisfied with how you spend your time at this home? Are you ever unhappy with the care you get at this home? Do you feel free to speak up to staff when you are unhappy with your care? Do you get the care you need at this home?				

32. How has the pandemic changed your satisfaction with the following aspects of your care and experience in this LTC home?

Mark only one oval per row.

	Significantly less satisfied	Somewhat less satisfied	No change	Somewhat more satisfied	Significantly more satisfied
Overall care					
Cleanliness of the home					
Meals - food provided					
Mealtime experience (such as dining room)	\bigcirc		\bigcirc		
Your access to activities					
Your access to health care staff	0	0			
Your access to programs and treatments	0	0	0	0	0

33. These next few questions are about you. First we want to know how you feel about your life now. Use any number from 0 to 10 where 0 is the worst possible and 10 is the best possible. What number would you use to rate your life now?

Mark only one oval.

23/202		Long term care resident experience out ye
3	37.	What is your age
		Mark only one oval.
		18-34
		35-44
		45-54
		55-64
		65-74
		75-84
		85-94
		95+
	38.	What is the highest level of school that you have completed?
		Mark only one oval.
		Grade school or some high school
		Completed high school or GED
		Post secondary technical school
		Some university or college
		Completed college diploma
		Completed university degree
		Post grad degree (Ph.D. or MD)
4	39.	What is your race or ethnicity?
		Mark only one oval.
		White / Caucasian
		Indigenous / Aboriginal
		Multiracial / Multiethnic
		Other:

4/23/2021	Long Term Care Resident Experience Survey
40.	What is your gender?
	Mark only one oval.
	Female
	Non-binary Non-binary
	Male
	Transgender
	I prefer to self-describe:
41.	Do you currently have a roommate?
	Mark only one oval.
	Yes
	◯ No
40	De very house difficulty with Feeligh Incomes?
42.	Do you have difficulty with English language?
	Mark only one oval.
	Yes
	Yes to some extent
	○ No
43.	Have you had a discussion with family or a close friend about what healthcare treatment you want or do not want if you become very ill and you cannot speak for yourself?
	Mark only one oval.
	Yes
	◯ No
	I don't know / I am not sure

47. How did that person help you?

Read the questions to me
Recorded the answers I gave
Answered the questions for me

Translated the questions into my language

Check all that apply.

Other:

4/23/2021	Long Term Care Resident Experience Survey
48.	Do you have any additional comments or concerns you would like to share about your experience in this LTC home? If so, please explain.
Thar	nk You! Your opinions are very important to us.