Bay St. George Long Term Care Family 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

Western Health promoted the LTC Family Experience Survey broadly on the organization's website and social media pages throughout the administration period of May 3 to June 25, 2021. The LTC facilities contacted residents' family members through mail or email to share a letter outlining the survey and provide the paper copy and/or electronic link. Each facility identified an individual who was available to administer the survey in-person or over the telephone. Posters were also displayed within the facility. Print copies of the surveys and return boxes were available at the visitor screening booth or LTC check-in areas. Completed print format surveys were transcribed into the Get Feedback platform by staff, students, and/or nurses on ease-back.

Sample

All resident family members were given the opportunity to complete the survey. Across the Western Health region, 342 participants completed the survey. For Bay St. George Long Term Care Centre (BSGLTC), 39 family members completed the survey.

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 family members or resident 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 into the platform from paper copies of the survey. Reports were developed and analyzed in this survey platform. Descriptive statistics were calculated to obtain a general perspective of family members' 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 family members are not the same individuals whose loved ones were residing in LTC in 2016. The following report provides survey results for the BSGLTC.

Results

Demographics

A total of 39 surveys were completed by family members of residents in BSGLTC. This is a small increase in sample size from the 35 family members who participated in the 2016 survey.

Respondents were asked several questions to gain a more thorough understanding of the demographics of the family members being surveyed and their loved ones living in long term care, including relation to the resident, if the resident was discharged from the facility or was deceased, how long the resident lived there, and if they expected their family member to live in a long term care home permanently. When asked their relationship to the resident, 22% reported that the resident was their spouse or partner, 38% reported their parent, 5% reported their mother-in-law or father-in-law, no one (0%) reported their grandparent, 3% reported their aunt or uncle, 16% reported their sibling, 5% reported their child, 8% reported their friend, and 3% reported other. In comparison, in 2016, 20.0% reported that the resident was their spouse or partner, 54.3% reported their parent, 2.9% reported their aunt or uncle, 20.0% reported their sibling, and 2.9% reported their child. The majority (75%) of the respondents indicated that the resident lived in LTC for twelve months or longer, 8% reported six months to almost twelve months, no one (0%) reported three months to almost six months, 11% reported one month to almost three months, and 6% reported less than one month.

Although efforts were taken to reduce the potential that a family member or next of kin received a survey after the resident had died, one respondent indicated that the resident was deceased. This respondent chose to continue the survey and reported based on the residents last six months in the LTC home. The majority (75%) of the respondents indicated that the resident lived in LTC for twelve months or longer, 8% reported six months to almost twelve months, no one (0%) reported three months to almost six months, 11% reported one month to almost three months, and 6% reported less one month. Of the respondents, 81% reported that they expected the resident to live in a LTC home permanently.

Respondents were also asked to indicate whether they were the individual who had the most experience with the resident's care and 75% reported yes, 19% reported no, and 6% did not know. Other questions were asked about finances, power of attorney, and substitute decision maker (See Table 1). The majority of the respondents (60%) were the resident's substitute decision maker and 51% of respondents reported that they had power of attorney.

<u>Table 1. Family Member Involvement and Role</u>

Question	Yes (%)	No (%)	Don't know (%)
In the last six months, did you help your family with managing finances, such as paying bills or filling out insurance claims?	47	53	N/A
Do you have power of attorney for your family member?	51	43	6
Are you your family member's substitute decision maker (next of kin)?	60	26	14

To gain a more thorough understanding of the demographics of the LTC families, respondents were asked about their age, gender identity, race or ethnicity, and educational background. Of the 35 respondents who reported their age, 3% were 85-94, 14% were 75-84, 37% were 65-74, and 23% were 55-64 and 20% were 45-54, no one (0%) was 35-44, and 3% were 25-34. Of the respondents, 66% were female and 34% were male. Of the respondents. 57% identified as white/Caucasian and 43% identified Indigenous/Aboriginal. Of the respondents, 22% had completed grade school or some high school, 22% completed high school, 3% completed post-secondary technical school, 6% completed some university or college, 28% reported that they completed a college diploma, 17% completed a university degree, and 3% reported that they completed a postgraduate degree. When asked about support with survey completion, 11% of the respondents had assistance, with the most common assistance being 'read the questions to me' (67%) and 'recorded the answers I gave' (67%).

Visitation and Activities

Family members were asked questions about virtual visits, designation as essential visitors, and in-person visits during the past six months.

Family members were asked if the visitor restrictions implemented during the previous six months had changed their in-person contact with their family member in LTC. Of the respondents, 30% reported a significant decrease, 32% reported some decrease, 24% reported no change, 11% reported some increase, and 3% reported a significant increase.

Family members were asked if, over the last six months, they were designated as an essential visitor or support person for their family member. Of the respondents, 76% reported yes and 24% reported no. Those designated as essential visitors or support persons were asked about how many times they visited the resident in the past six months. Of the respondents, the majority (56%) reported more than 20 times, 28% reported 11-20 times, 8% reported 6-10 times, 4% reported 2-5 times, and 4% reported 0-1 time.

Family members 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, 46% reporting having virtual visits and 54% reported they did not have virtual visits. Of those who had virtual visits, 12% reported daily visits, 23% reported several times per week, 41% reported weekly, 18% reported having visits several times per month, and 6% monthly or less. Of those who had virtual visits, 73% reported that they had virtual visits because they could not visit in-person due to restrictions, 45% had virtual visits to have additional contact with their family member between their inperson visits, and 18% of respondents reported that they had virtual visits because they live too far away for in-person visits. When asked if they had enough virtual visits to meet their family member's needs, 71% of respondents reported yes and 29% reported no.

Family members also provided comments on their experiences with visitor restrictions. One common theme was that respondents felt that the staff were doing a good job with managing restrictions and scheduling visits. There were also some frustrations shared in regards to having to schedule visits and with the visitation schedule. A common suggestion was to allow more frequent, shorter visits.

Resident Care

Several questions were asked about health care in terms of the respondents' perspective and experiences over the past six months (See Figure 1). Respondents were asked how often they felt that there was enough nursing staff in the LTC home and, of the respondents, 23% reported always, 15% reported usually, 46% reported sometimes, and 15% reported never. When asked if their family member received all of the health care services and treatments they needed over the past six months, 90% of respondents reported usually or always. When asked if their satisfaction with their family member's access to programs and services had changed because of the pandemic, 70% of respondents reported no change, 26% reported decreased satisfaction, and 4% reported increase satisfaction. When asked if their satisfaction with their family member's access to the health care staff had changed because of the pandemic, 82% or respondents reported no change, 11% reported decreased satisfaction, and 7% reported increased satisfaction.

The majority of the respondents reported that they had always or usually seen the health care team treat the resident with kindness (84%) and that they always or usually felt that the health care staff really cared about the resident (84%). These are both increase from the 2016 results, in which 75% reported nursing staff were kind and 77% reported nursing staff really cared.

Respondents were asked how often the resident looked and smelled clean in the last six months and 85% reported usually or always. This is a significant increase from 74%

reported in 2016. Family members were also asked if they had ever seen the LTC home staff fail to protect any resident's privacy while the resident was dressing, showering, bathing, or in a public area and 100% of respondents reported no.

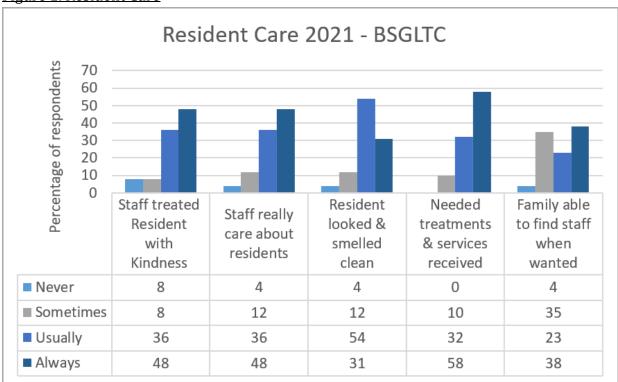


Figure 1. Resident Care

Respondents were asked about their satisfaction with the care provided to their family member by specific services or providers. Overall, the majority of respondents were usually or always satisfied with each of the services or providers. Results for those respondents whose family members availed of the services are outlined in Table 2.

Table 2. Family Member Satisfaction with Services/Providers (percent of respondents)

	Never (%)	Sometimes (%)	Usually (%)	Always (%)
Nursing staff	3	8	32	57
Doctor/Nurse Practitioner	0	12	36	51
Occupational Therapy	14	9	24	52
Physiotherapy	18	6	23	53
Recreation Therapy	4	4	34	58
Social Work	3	0	17	79
Spiritual Care	17	0	22	61

Respondents were also asked in their satisfaction with their family member's overall care changed because of the pandemic. Of the respondents, 79% reported no change, 17% reported a decrease in satisfaction, and 3% reported an increase in satisfaction.

Respondents were asked if in the last six months, they saw any resident behave in a way that made it hard for LTC staff to provide care such as yelling, pushing, or hitting. Of the 68% who reported seeing this happen, 70% reported that the staff always or usually handled this situation in a way that they felt was appropriate. This was a decrease from 2016, when 83% of respondents 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 health care staff be rude to their loved one or any other resident, 92% reported never, 4% reported sometimes, and 4% reported always. This is an increase from 77% who reported no in 2016.

Respondents were asked if they helped with the care of the resident when they visited and 64% reported yes, while 19% reported that they felt the long term care home staff expected them to help. This is an increase from 2016, when 60% reported yes and 6% reported that they felt staff expected them to help.

Family members were also asked questions about whether they helped residents with specific aspects of their care over the past six months and if this was because they chose to help or if it 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, 13% reported that they did not help, 80% reported that they chose to help on their own, and 7% reported that they helped because staff did not help or made the resident wait too long. When asked if they had helped the resident with drinking, 7% reported that they did not help, 87% reported that they chose to help on their own, and 7% reported that they helped because staff did not help or made the resident wait too long. Respondents were also asked if they helped the resident with toileting and 53% reported that they did not help, 40% reported that they chose to help on their own, and 7% reported that they helped because staff did not help or made the resident wait too long. As shown in Table 3, in comparison to the 2016 results, there was an increase in overall help with care, as well as help with eating, drinking and toileting. There was also a significant overall decrease in family members reporting that they helped because staff did not or made the resident wait too long.

Table 3. Help with Care (%)

	Helped with		Helpe	d with	Helpe	d with	Helped with	
	care (general)		eating		drinking		toileting	
	(%)		(%	6)	(%	(%)		6)
	2016	2021	2016	2021	2016	2021	2016	2021
Helped with care (total)	60	64	40	87	34	94	9	47
Helped because staff made resident wait too long	n/a	n/a	14	7	17	7	33	7

A common theme in family members' comments was that the LTC home was understaffed and staff were overworked. Most comments focused on nursing staff; however, the need for additional volunteers and for additional staffing or extended hours in housekeeping was also noted.

Family members provided comments regarding the overall care their loved ones received. The majority of comments provided were that family members were happy and appreciative of the care provided. Of those who raised concerns about care, their comments included that there was a lack of compassion, that residents need to be changed more frequently and that staff needed to be more responsive to buzzers and phone calls.

Resident Health and Wellness

Respondents were asked about the health and wellness of their family member residing in the LTC home. The majority (61%) reported that their family member has serious memory problems because of Alzheimer's disease, dementia, stroke, accident, or something else. Family members were asked how often the resident was able to make decisions about his or her own daily life, such as when to get up, what clothes to wear, and which activities to do. The majority of the respondents (45%) were able to make decisions at least some of the time. Overall, 56% reported never, 31% reported sometimes, 6% reported usually, and 8% reported always.

Family members were asked to indicate how they would rate their family member's overall mood or emotional wellbeing. Of the respondents, 3% reported excellent, 24% reported very good, 38% reported good, 27% reported fair, and 8% reported poor. Family members were also asked to indicate how their family member's mood had changed because of the pandemic. Of the respondents, 44% reported no change, 31% reported a little worse, 22% reported significantly worse, and 3% reported a little better.

Environment

Respondents were asked to report on various aspects of the environment based on the last six months (See Figure 2). When respondents were asked how often the residents' room

looked and smelled clean, 72% report usually or always, while 87% reported that the public areas looked and smelled clean. Respondents were also asked if their satisfaction with the cleanliness of the facility changed because of the pandemic and 69% of respondents reported no change, 7% reported decreased satisfaction, and 24% reported increased satisfaction.

The majority of the respondents (84%) 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% reported usually or always. When asked whether or not their family members had a private room, the majority (76%) reported the resident had shared a room with another person at the LTC home within the last six months and 24% have a private room.

One comment provided that could be explored for potential improvement was to ensure the compatibility of roommates, with particular attention to the communication skills and issues with dementia or memory.

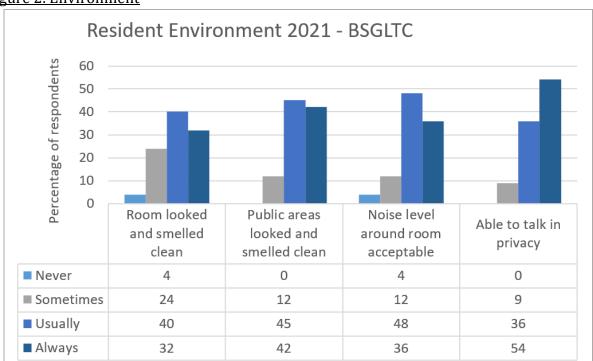


Figure 2. Environment

The common theme in family members' comments about the LTC home environment was that the building is old and in need of updating. Some specific suggestions for updating included the building itself, the computers and televisions, the furniture, and green space.

Another concern about the building was that the entrance is too small for proper physical distancing and too small for wheelchair access.

Residents' Personal Belongings

Questions were asked related to personal belongings over the last six months. When asked how often residents' personal medical belongings (e.g., dentures, hearing aids, eye glasses) were clean and in good condition, 12% reported never, 12% reported sometimes, 37% reported usually, and 37% reported always. When asked how often residents' personal medical belongings were damaged or lost, 68% of respondents reported never, 26% reported sometimes, no one (0%) reported usually, and 5% reported always. When asked how often clothes that were cleaned by LTC's laundry services were damaged or lost, of those who used the service, 39% reported never, 48% reported sometimes, 4% reported usually, and 9% reported always.

Family members also provided some comments about their experiences with residents' personal belongings. The common concern was personal items being lost.

Residents' Meals

Family members were asked about their satisfaction with various aspects of the meals provided to their family member at the LTC home. The majority of the respondents were usually or always satisfied with the visual appeal (84%), taste (71%), temperature (75%), and mealtime experience (82%). When asked if their satisfaction with the meals provided to their family member had changed because of the pandemic, 93% of respondents reported no change, 3% reported decreased satisfaction, and 3% reported increased satisfaction. When asked if their satisfaction with their family member's mealtime experience (how meals are served) had changed because of the pandemic, 92% of respondents reported no change, 4% reported decreased satisfaction, and 4% reported increased satisfaction.

Family members also provided some comments about their experience with residents' meals. The comments included an overall need for improvement, a need for more water, and food being cold.

Access, Communication, and Family Involvement

Respondents were asked several questions about overall care and communication with the health care team in the last six months. Of those who reported that they had tried to find health care staff, 61% reported they could usually or always find one when they wanted one, which is a significant decrease from 87% in 2016. When asked if their satisfaction with their access to the health care staff had changed because of the pandemic, 70% of respondents reported no change, 23% reported decreased satisfaction, and 7% reported

increased satisfaction. The significant majority (94%) of the respondents reported that the health care team always or usually treated them with courtesy and respect.

Questions about obtaining information were asked in relation to the last six months. Of the respondents, 86% reported that they usually or always received the information they needed about their family member, a decrease from approximately 90% in 2016. When asked if things were explained in a way that was easy for them to understand, 84% reported usually or always. When asked if they were discouraged from asking questions about their family member, 82% of respondents reported never, 9% reported sometimes, 3% reported usually, and 6% reported always. Respondents were asked if they got all of the information they wanted about payments or expenses. Of the 62% of respondents who asked for this information, 85% usually or always got all the information they wanted.

When respondents were asked if they were ever unhappy with the care the resident received, 35% of respondents reported yes and 65% reported no. Of those who reported having concerns, 92% reported that they spoke to long term care home staff about this concern and 50% were usually or always satisfied with the way the staff handled these problems and 50% were sometimes satisfied. Only 11% of respondents 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. This shows a significant increase in family members feeling open and safe to bring forward concerns, from 50% who reported that they stopped themselves from talking to any long term care home staff about their concerns in 2016.

Family members were asked about their involvement in care and experience with case conferences. Of the respondents, 89% reported being involved in decisions about the residents' care over the last six months, an increase from 60% in 2016. Of those who were involved in decisions, 84% reported being usually or always involved as much as they wanted to be, an increase from 71% in 2016. Respondents were asked about whether they had been part of a care conference over the last 12 months, either in person by telephone or by videoconference. Of the respondents, 50% reported yes, 8% reported no because they chose not to attend, 8% reported no because they were not given the opportunity, and 33% reported that they did not know or were unsure.

Family members provided comments about communication with the health care staff. The common theme was that family members were kept informed. Family members noted feeling part of the team and that staff were available and friendly.

Overall

When asked to rate the LTC home, on average, respondents rated the home at 7.26 (range 0-10; 0 being the worst possible and 10 being the best possible). When family members were asked to rate the overall care their family member received at the LTC home, the respondents rated overall care at 7.75 (range 0-10; 0 being the worst possible and 10 being the best possible). This is a decrease from 8.38 in 2016. When asked if they would recommend this LTC home to someone needing long term care, 36% of the respondents reported definitely yes, 47% reported probably yes, 8% reported probably no, and 8% reported definitely no.

Respondents were also asked if they felt that the protocols and restriction put in place during the pandemic have worked to keep their family member safe from getting COVID-19. Of the respondents, 74% reported definitely yes, 17% reported probably yes, 9% reported probably no, and no one (0%) reported definitely no.

Overall, there were very limited written comments received from family members of the BSGLTC residents. While the themes and comments available have been provided throughout this report, please refer to the regional report for additional details on common themes from family member comments.

Strengths and Opportunities for Improvement

Overall results indicate that BSGLTC services have many strengths, including kindness and respectfulness of the health care staff. Respondents also reported being satisfied with the overall care of their family member, as well as and their own treatment by staff and involvement in health care decisions. Other overall strengths include cleanliness of the public areas, noise level, and privacy.

Also admirable is that BSGLTC responded to the pandemic without any significant negative impact on family members' experience and satisfaction. When asked about the impact of the pandemic on their satisfaction with various aspects of their experience and their family member' care, the majority of residents reported no change or improvement in their satisfaction with access to health care staff, the residents' access to programs and treatment, overall care, among other factors.

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

- Quality of meals and access to something to drink;
- Staffing levels;
- Responses to resident behaviours such as yelling, pushing or hitting;

- Frequency of resident changes;
- Responsiveness to resident buzzers and requests;
- Effectiveness of problem solving strategies and communication with families when concerns arise;
- Protection against loss or damage of residents' clothing and cleanliness of personal medical belongings; and
- Building updates, including the physical building, furniture, green space, and wheelchair accessibility of entrance.

The survey results also suggest that LTC leadership support families to be present and much as feasible and safe, as well as consider advocating for the designation of an essential visitor for every resident at all times.

Appendix A

Western Health Family Experience Survey 2021

Long Term Care Family Experience Survey

This survey is part of our efforts to understand how families view their experience of having a loved one 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 families who respond on our website: 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.

We hope that you will take the time to complete the survey. Your participation is greatly appreciated. Your participation in this survey is voluntary and will not affect your loved ones health care. We have prepared the survey to be anonymous and will not identify you as a participant. Please complete the survey by June 25, 2021.

If you have any questions about the survey, please call Tracey Wells-Stratton, Regional Manager Research and Evaluation at (709)784-6801, or email her at traceywells@westernhealth.nl.ca. Thank you for helping to improve long term care in the Western region.

1.	For this survey, the phrase "family member" refers to the resident in long term care. At which Long									
	Term Care (LTC) facility does your family member live?									
	Mark only one oval.									
	Dr. Charles L. LeGrow Health Centre (Port Aux Basques)									
	Calder Health Care Centre (Burgeo)									
	Bay St. George Long Term Care Centre (Stephenville Crossing)									
	Corner Brook Long Term Care (Corner Brook)									
	Protective Community Residences (Corner Brook)									
	Western Long Term Care (Corner Brook)									
	Bonne Bay Health Centre (Bonne Bay)									
	Rufus Guinchard Health Centre (Port Saunders)									
2.	Overall, how would you rate this LTC Home? 0 is the worst possible & 10 is the best possible									
	Mark only one oval.									
	0 1 2 3 4 5 6 7 8 9 10									
	Worst possible O O O O O Best possible									

3.	Is your family member now living in long term care?
	Mark only one oval.
	Yes Skip to question 5 No
4.	Was your family member discharged from this facility or is he/she deceased?
	Mark only one oval.
	Discharged - if you checked discharged, please stop completing this survey and submit. Deceased - If your family member is deceased, we understand that you may not want to fill out a survey at this time. If this is the case, please check the box indicating that your family member is deceased and submit the survey.
	Deceased - If your family member is deceased, we understand that you may not want to fill out a survey at this time. However, if you would like to do the rest of the survey, we would be grateful for your feedback. Please answer the questions based on your family member's last six months at the nursing home. Thank you for your help.
5.	In total, about how long has your family member lived in this LTC home? Mark only one oval.
	Less than 1 month
	1 month to almost 3 months
	3 months to almost 6 months
	6 months to almost 12 months
	12 months or longer
6.	Do you expect your family member to live in this or any other LTC home permanently?
	Mark only one oval.
	Yes No
	I don't know / I am not sure

7.	In the last 6 months, has your family member ever shared a room with another person at this LTC home?
	Mark only one oval.
	Yes No
8.	Does your family member have serious memory problems because of Alzheimer's disease, dementia, stroke, accident, or something else?
	Mark only one oval.
	Yes No
9.	In the last 6 months, how often was your family member capable of making decisions about his or her own daily life, such as when to get up, what clothes to wear, and which activities to do?
	Mark only one oval.
	Never
	Sometimes Usually
	Always
10.	How would you rate your family member's mood or emotional well-being?
	Mark only one oval.
	Excellent
	Very good Good
	Fair
	Poor

11.	How do you feel your family member's mood or emotional well-being has changed because of the pandemic?
	Mark only one oval.
	Significantly worse A little worse
	○ No change
	A little better
	Significantly better
12.	During the last 6 months, how often did you have 'virtual visits' with your family member: talk on the phone or through video calls (FaceTime, Google Duo, etc.)?
	Mark only one oval.
	Daily
	Several times per week
	Weekly
	Several times per month
	Monthly or less
	Do not have virtual visits Skip to question 15
13.	Why did you have virtual visits?
	Check all that apply.
	I live far too far away for in-person visits
	I could not visit in-person due to visitation restrictions
	To have additional contact with my family member between my in-person visits
14.	Over the past 6 months, did you have enough virtual visits to meet your family member's needs?
	Mark only one oval.
	Yes
	◯ No

15.	Did the visitor restrictions implemented during the last 6 months of the pandemic change your in- person contact with your family member?
	Mark only one oval.
	Significant decrease
	Some decrease
	○ No change
	Some increase
	Significant increase
16.	Do you have any additional comments you would like to share about your experience with visits at the LTC home or changes to visits during the pandemic? If so, please explain:
	<u></u>
17.	Over the past 6 months, were you designated as an essential visitor or support person for your
	family member?
	Mark only one oval.
	Yes
	No Skip to question 28
10	
18.	If you were a designated visitor or support person, about how many times did you visit your family member in the LTC home in the last 6 months?
	Mark only one oval.
	O-1 times in the last 6 months Skip to question 28
	2-5 times in the last 6 months
	6-10 times in the last 6 months
	11-20 times in the last 6 months
	More than 20 times in the last 6 months

Mark only one oval per row.					
	Never	Sometimes	Usually	Always	Not applicab
How often did you feel that there was enough nursing staff in the nursing home?	0		0	0	0
If you tried to find for any reason, how often were you able to find a health care staff when you wanted one?	0	0	0	0	0
How often did you see the health care team treat your family with kindness?	0		0	0	
How often did you feel that the health care team really cared about your family member?	0	0	0	0	0
Did you see any of the health care staff be rude to your family member or any other resident?	0	0	0	0	
In the last 6 months, how often did your f	amily me	mber look ar	nd smell c	lean?	
In the last 6 months, how often did your for Mark only one oval. Never Sometimes Usually Always	amily me	ember look ar	nd smell c	lean?	

Help with eating Help with drinking	0	0	0								
Help with eating	0										
	-										
	No	Yes - Chose to help on my own	Yes - Staff did not help or made him/her wait too long								
Mark only one oval per row.											
In the last 6 months, did you help your family member with any of the following during your visits?											
○ No											
Yes											
Mark only one oval.											
Do you feel the LTC staff expect	you to h	nelp with your fa <mark>mily me</mark> r	mber's care when you visit?								
◯ No											
Yes											
Mark only one oval.											
you visited?	n your v	visits, dia you neip with tr	re care or your family member wi								
In the last 6 months, during any	of course	visite did you halo with th	ne care of your family member wh								
Not applicable - situation did n	ot occur										
Always											
Usually											
Sometimes											
Never											
Mark only one oval.											
way that you felt was appropriate?											
way that you felt was appropriate	Sometimes residents make it hard for LTC staff to provide care by doing things like yelling, pushing, or hitting. In the last 6 months, how often did you see the health care staff handle this situation in a										

THE LTC HOME

	Never	Sometimes	Usually	Always	Not applicable
Family member's room looked and smelled clean	\circ		\circ	\bigcirc	
Noise level around family member's room was acceptable	0	0	0	0	0
Able to find places to talk to family member in private	0	0	0	0	0
The public areas of the LTC home, such as the main entrance and dining areas, looked and smelled clean	0	0	0	0	0
Personal medical belongs (hearing aides, eye glasses, dentures, etc.) were clean and in good condition	0	0	0	0	0
Personal medical belongs were damaged or lost	0	0	0	0	0
Clothes cleaned by LTC's laundry services were damaged or lost	0	0	0		0
Do you have any additional comments you cleanliness, noise level, or personal belong					

28.	In the past 6 months, how often did you e	xperienc	e the followi	ng with th	ne LTC he	ealth care team:
	Mark only one oval per row.					
		Never	Sometimes	Usually	Always	Not applicable
	You were treated with courtesy and respect					
	You received the information you needed about your family member	0		0		
	Things were explained to you in a way that was easy to understand	\circ		\circ	\circ	
	You were discouraged from asking questions about your family member	0		0	0	
29.	At any time in the last 6 months, were you at the LTC home?	ever un	happy with th	ne care yo	our family	/ member received
	Mark only one oval.					
	Yes					
	No Skip to question 32					
30.	Did you talk to any of the LTC staff about	these co	ncerns?			
	Mark only one oval.					
	Yes					
	No Skip to question 32					
31.	How often were you satisfied with the wa	y the LTC	C staff handle	ed the co	ncerns?	
	Mark only one oval.					
	Never					
	Sometimes					
	Usually					
	Always					

32.	In the last 6 months, did you ever stop yourself from talking to any LTC staff about your concerns because you thought they would take it out on your family member?
	Mark only one oval.
	Yes No
CA	ARE OF YOUR FAMILY MEMBER
33.	In the last 6 months, how often were you involved as much as you wanted to be in the decisions about your family member's care?
	Mark only one oval.
	Never Sometimes Usually Always Not applicable - not involved in care decisions
34.	An interdisciplinary care conference is a meeting about care planning and health between a care team and resident and his/her family. In the last 12 months, have you been part of an interdisciplinary care conference, either in person, by phone, or by videoconference? Mark only one oval.
	Yes No - chose not to attend No - not given the opportunity to attend I don't know / I am not sure

Mark only one oval.								
Never								
Sometimes								
Usually								
Always								
I don't know / I am	not sure							
Using any number from	m () to 10 u	hara O is the	worst sas	a passible	and to is the	hart e		reibla
what number would y							2.15	
Mark only one oval.				84.0004.700				
				6	7 8	9	40	
	0 1	2 3	4 5	0	, ,	. 9	10	
Worst care possible	00	00	00		00	0	0	
2000	how often v	were you satis	00		00	0	0	
Worst care possible In the past 6 months, the following services	how often v	were you satis	00		00	our fan	0	
Worst care possible In the past 6 months, the following services	how often v/providers?	were you satis	fied with	the care	provided to y	our fan	0	
Worst care possible In the past 6 months, the following services Mark only one oval per ro	how often v /providers?	were you satis	fied with	the care	provided to y	our fan	0	20.400.000.000
Worst care possible In the past 6 months, the following services Mark only one oval per ro Nursing Staff	how often vi/providers?	were you satis	fied with	the care	provided to y	our fan	0	
Worst care possible In the past 6 months, the following services Mark only one oval per ro Nursing Staff Nurse Practitioner / Dog	how often vi/providers?	were you satis	fied with	Always	provided to y	our fan	0	
Worst care possible In the past 6 months, the following services Mark only one oval per ro Nursing Staff Nurse Practitioner / Doc Occupational Therapy	how often with the providers? Never tor	Sometimes	Usually	Always	provided to y	our fan	0	20.400.000.000
Worst care possible In the past 6 months, the following services Mark only one oval per ro Nursing Staff Nurse Practitioner / Doc Occupational Therapy Physiotherapy	how often with the control of the co	Sometimes	Usually	Always	provided to y	our fan	0	Best care possit

Mark only one oval per row.					
	Never	Sometimes	Usually	Always	Not present for meals
Visual appeal (how the food looked)					
Taste	0	0	0	0	
Temperature	0		0	0	0
Mealtime experience (how meals are served)	0	0	0	0	0
Definitely no					
Probably no Probably yes Definitely yes How has your satisfaction with the	following aspect	ects of your f	family me	mber's ca	re changed because
Probably yes Definitely yes How has your satisfaction with the of the pandemic?	following aspe	ects of your f	family me	mber's ca	re changed beca
Probably yes Definitely yes How has your satisfaction with the	following aspo Decreased satisfaction	ects of your f No change	family med Increa satisfa	sed	re changed beca I don't know / I an not sure
Probably yes Definitely yes How has your satisfaction with the of the pandemic?	Decreased	No	Increa	sed	I don't know / I an
Probably yes Definitely yes How has your satisfaction with the of the pandemic? Mark only one oval per row.	Decreased	No	Increa	sed	I don't know / I an
Probably yes Definitely yes How has your satisfaction with the of the pandemic? Mark only one oval per row. Overall care	Decreased	No	Increa	sed	I don't know / I an
Probably yes Definitely yes How has your satisfaction with the of the pandemic? Mark only one oval per row. Overall care Cleanliness of facility	Decreased	No	Increa	sed	I don't know / I an
Probably yes Definitely yes How has your satisfaction with the of the pandemic? Mark only one oval per row. Overall care Cleanliness of facility Meals - food provided	Decreased	No	Increa	sed	I don't know / I an
Probably yes Definitely yes How has your satisfaction with the of the pandemic? Mark only one oval per row. Overall care Cleanliness of facility Meals - food provided Mealtime experience Your family member's access to	Decreased	No	Increa	sed	I don't know / I an

41.	Do you agree that the protocols and restrictions put in place during the pandemic worked in keeping your family member safe from getting COVID-19?
	Mark only one oval.
	Definitely no Probably no Probably yes Definitely yes
42.	Do you have any additional comments you would like to share about your experience with LTC staff and the care of your family member? If so, please explain:
YO RO	U AND YOUR Please answer the questions in this section about your experiences. Please do not include the experiences of other family members.
43.	In the last 6 months, how often did you get all the information you wanted about payments or expenses?
	Mark only one oval.
	Never
	Sometimes
	Usually Always
	Not applicable - did not ask for information
44.	In the last 6 months, did you help your family member with managing finances, such as paying bills or filling our insurance claims?
	Mark only one oval.
	Yes No

45.	Power of attorney is a legal document that allows you to make decisions about your family member'
	finances or property. Do you have the power of attorney for your family member?
	Mark only one oval.
	Yes
	○ No
	I don't know / I am not sure
46.	A substitute decision maker is a person who is at least 19 years of age who has accepted the
	responsibility for ensuring the prior health care wishes of a person, who is now incompetent, are
	communicated to and carried out by healthcare providers. If an individual had not appointed a
	substitute decision maker, legislation identifies a list of persons who may act in this capacity.
	Regardless of the relationship, a person can act as a substitute decision-maker only if they have had
	personal involvement with the incompetent person in the preceding twelve months. In the past, the substitute decision maker has been referred to as the next of kin. Are you your family member's
	substitute decision maker (next of kin)?
	Mark only one oval.
	Yes
	○ No
	I don't know / I am not sure
47.	What is your relationship to the resident?
	AND CONTROL OF THE CO
	Mark only one oval.
	My spouse/partner
	My parent
	My mother-in-law/father-in-law
	My grandparent
	My aunt/uncle
	My sister/brother
	My child
	My friend
	Other:

48.	Considering all of the people who visit your family member in the LTC home, are you the person who has the most experience with his/her care?
	Mark only one oval.
	Yes No
	I don't know / I am not sure
49.	What is your age?
	Mark only one oval.
	18-24
	25-34
	35-44
	45-54
	55-64
	65-74
	75 or 84
	85-94
	95+
50.	What is your gender?
	Mark only one oval.
	Female
	Non-binary
	Male
	Transgender
	Prefer to self-describe:

51.	What is the highest grade or level of school that you have completed?
	Mark only one oval.
	Grade school or some high school
	Completed high school
	Post-secondary technical school
	Some university or college
	Completed college diploma
	Completed university degree
	Postgraduate degree (Master's or Ph.D)
52.	What is your race/ethnicity?
	Mark only one oval.
	White / Caucasian
	Indigenous / Aboriginal
	Multiracial / Multiethnic
	Other:
53.	Pid
10.	Did someone help you complete this survey?
	Mark only one oval.
	Yes
	◯ No
54.	How did that person help you?
	Check all that apply.
	Read the questions to me
	Recorded the answers I gave
	Answered the questions for me
	Translated the questions into my language
	Other:

55.	Do you have any additional comments you would like to share about your your experience or your family member's care in this LTC home? If so, please explain:					
Than	nk You! Your opinions are very important to us.					
	This content is neither created nor endorsed by Google.					
	Google Forms					