

The person in the Center

Lee Total Care @ Flora McDonald
Lodge



- The Sisters of St Joseph began caring for the aged through visiting the Adelaide Hospital, the Destitute Asylum and peoples' homes. The Sisters discovered the plight of many of the poor, especially aged women.



- With a view to assisting these women, they opened St Joseph's Providence in June, 1868. This charitable institution occupied a succession of rented premises in the City.
- In 1905, the Sisters purchased a house on West Terrace and moved the Providence there. It remained at West Terrace until 1951 when it was transferred to more congenial premises in Cowandilla.



- Throughout this institution's long history, the aged have always received the Sister's special care, although, while located in the city, younger women and children were admitted at times. The Sisters also gave material assistance to the many homeless men who came begging at their door. Today, Flora McDonald Lodge provides high quality Nursing Home and Hostel care.



This paper will demonstrate :

- how residents' nutrition has improved*
- how the general health and well being and infection, incident and wound rates of residents have greatly improved since implementing the Lee Total Care program at Flora McDonald Lodge in South Australia.*

By monitoring resident care through the Lee Total Care program, staff have more time to provide resident care which has placed residents' at the centre of care and staff are supported to be the person in the centre managing these great outcomes.



In relation to nutrition:

- *the resident's weight list has enabled staff the ability to examine resident's individual weights over a period of time, and the entire facility's weights.*



*The results can be graphed and
identify trends and residents at risk*

*LTC has saved us time thus
allows us to act promptly on
weight loss.*



Before we had LTC, we had to go through each resident individual case notes (81 residents) and find details of their individual weight's.

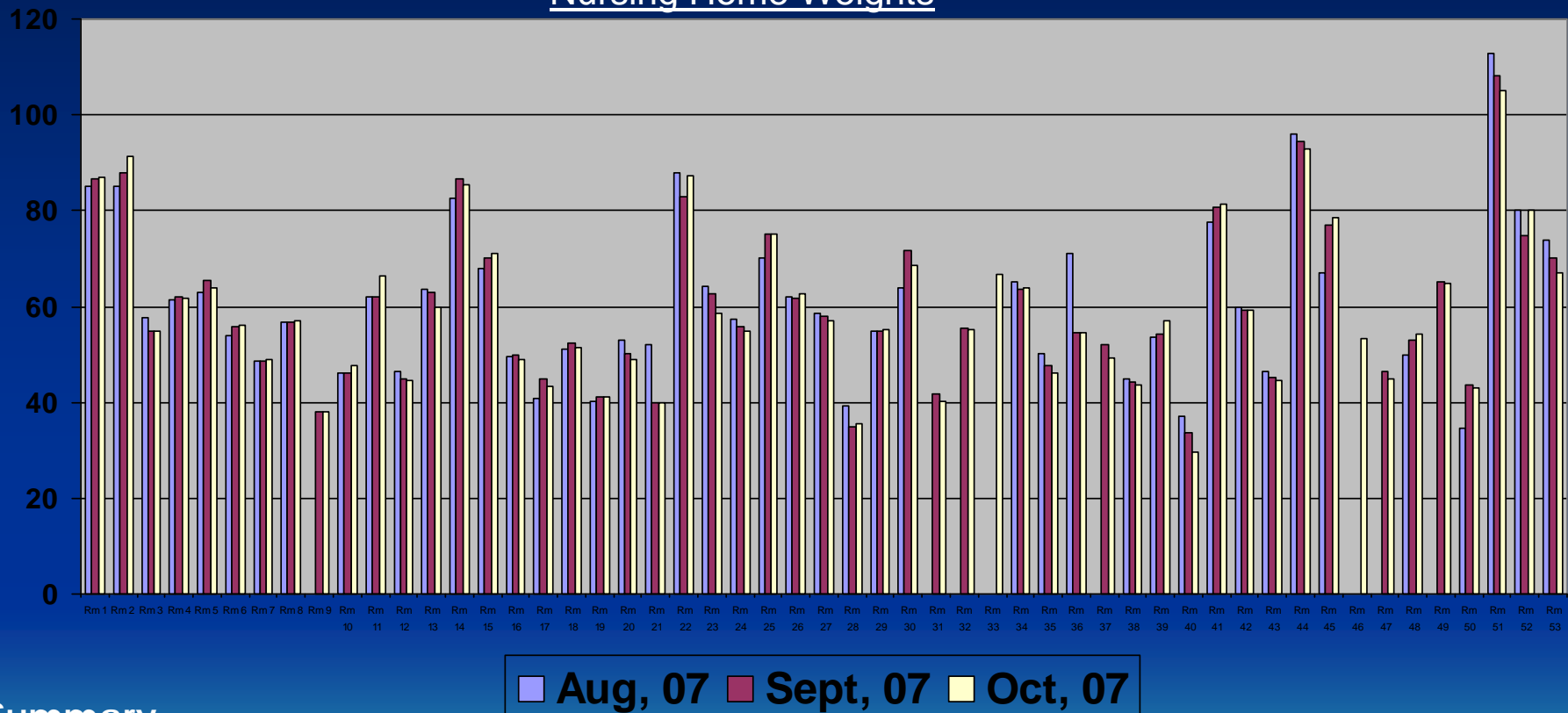
This was a 2 day job.

Now cut down to an hour.



Our detailed quality reports / graphs demonstrate that since using the program, resident's nutrition has improved

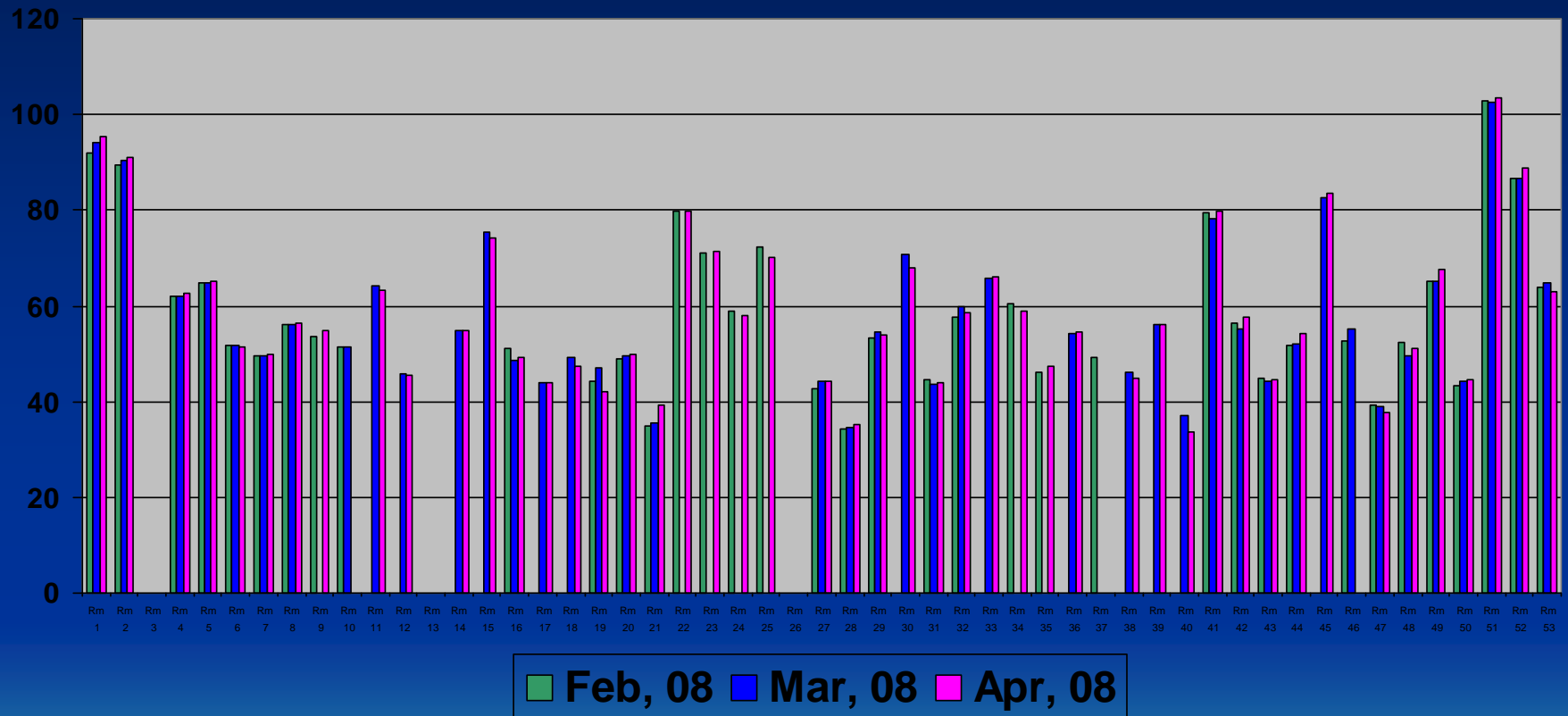
Nursing Home Weights



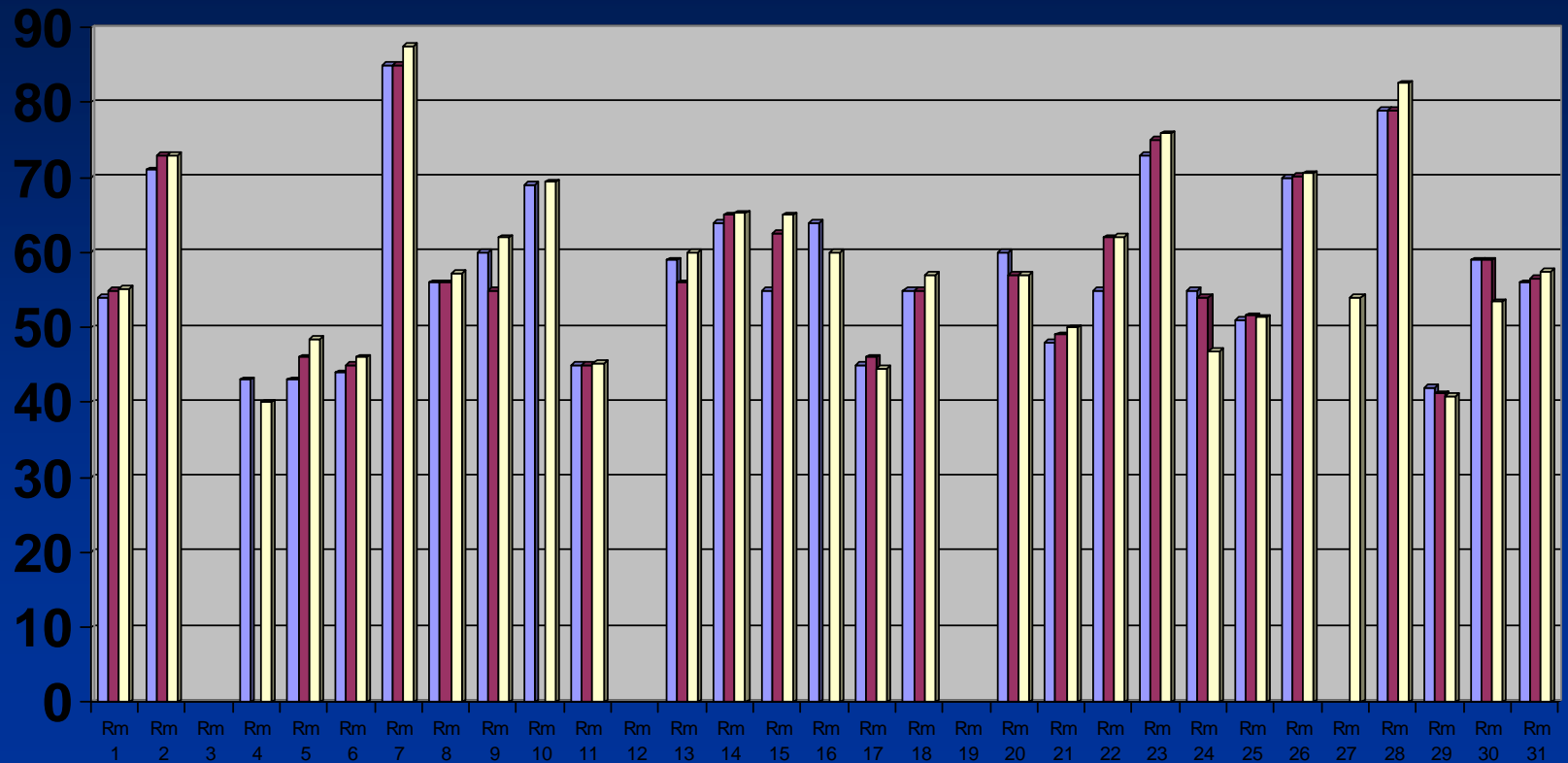
Summary

This graph demonstrates resident's weights from August 2007 to October 2007. Most resident's weights have increased since High protein/High energy diet in place.

Nursing Home Weights



Hostel Weights

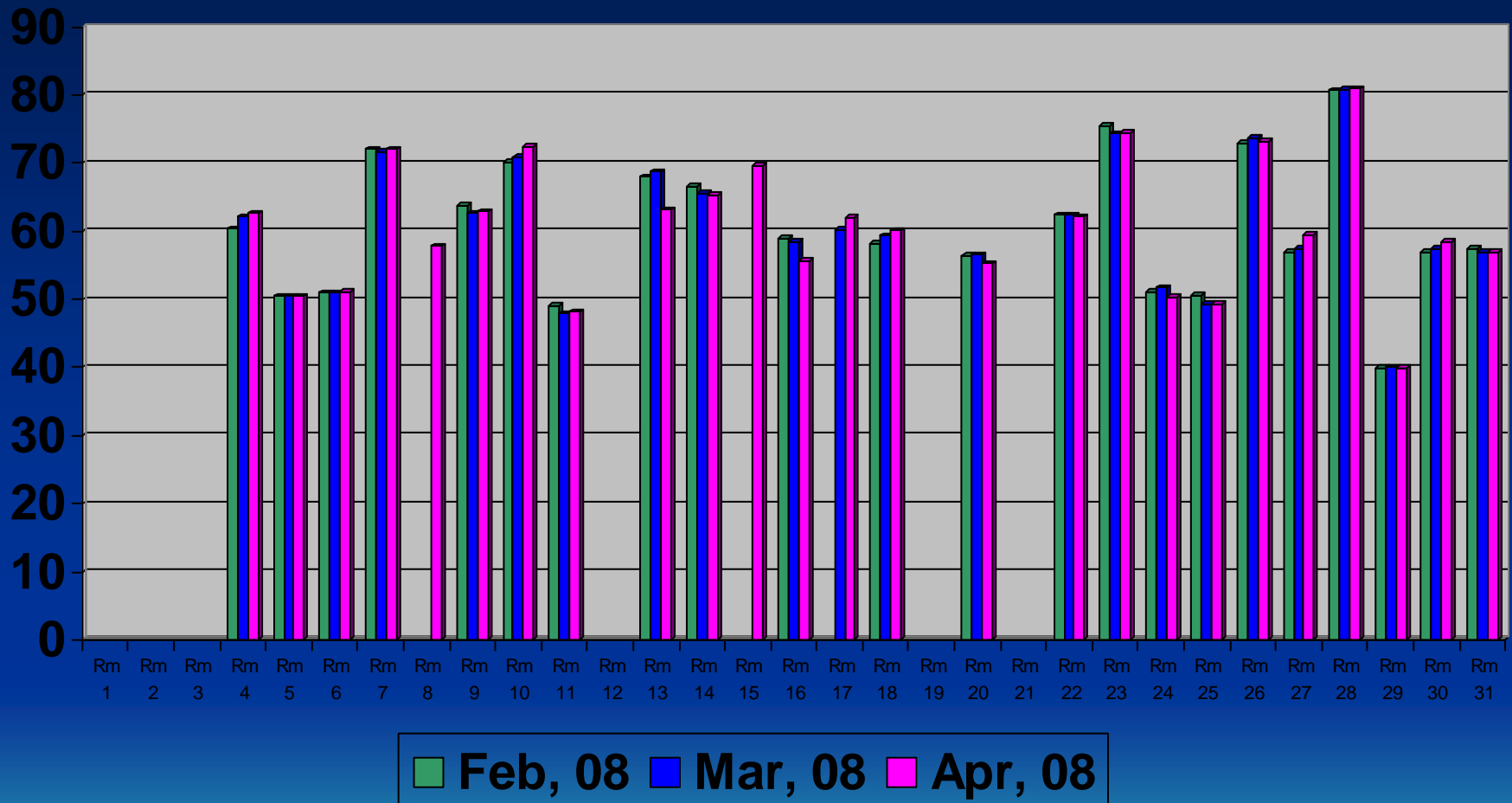


Aug-07 Sep-07 Oct-07

Summary

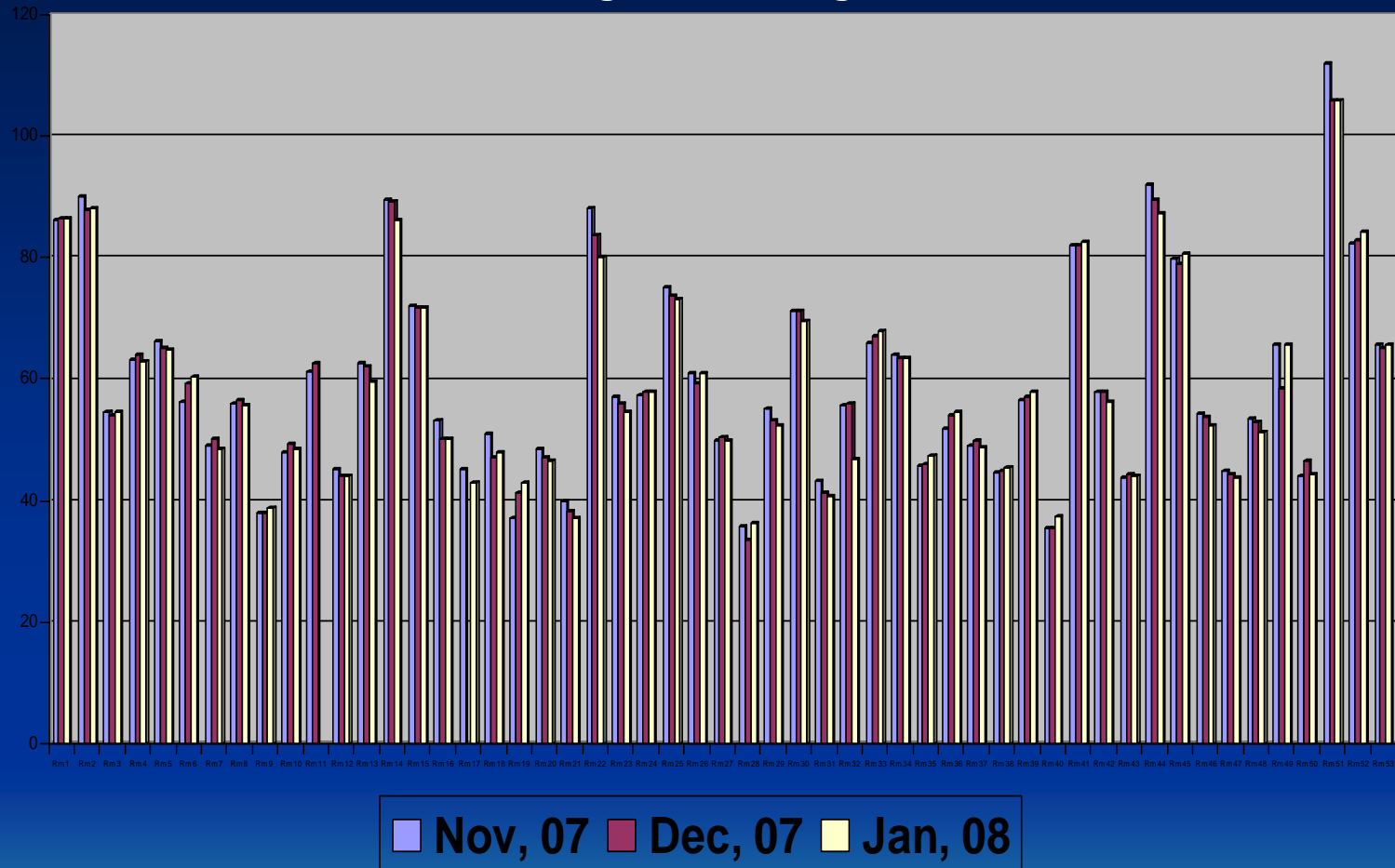
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Hostel Weights



Dietitian reviews have decreased from 27 to 6 per month

Nursing Home Weights

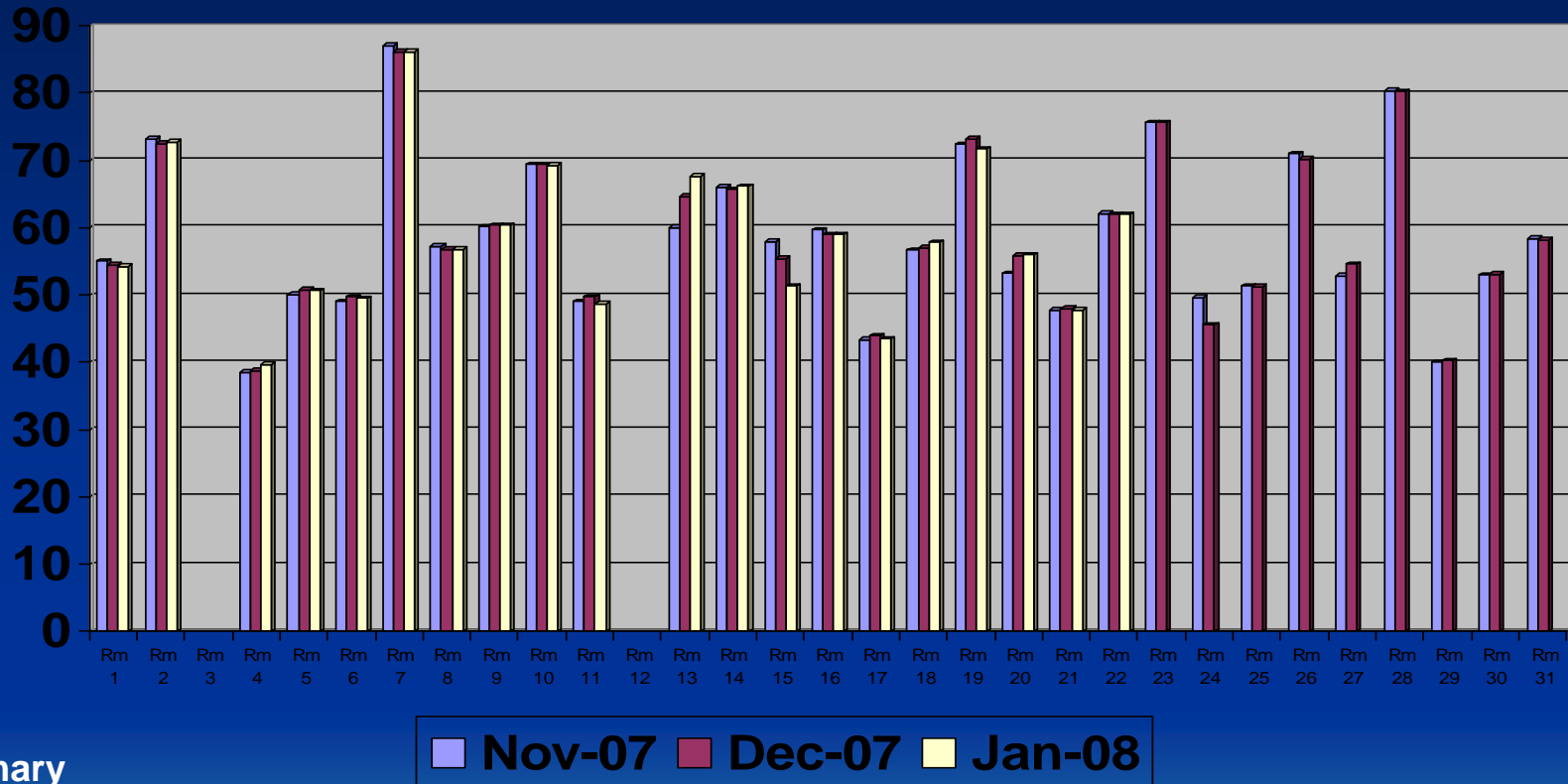


Summary

This graph demonstrates resident's weights from November 2007 to January 2008. Most resident's weights have increased since High protein/High energy diet in place. Milky bar, nesquick and milo puddings have also been introduced for residents who are on a vitamised diet. Resident's on vitamised diet's are at high risk of losing weight, these puddings were introduced to lessen that risk.

Resident weights have increased

Hostel Weights

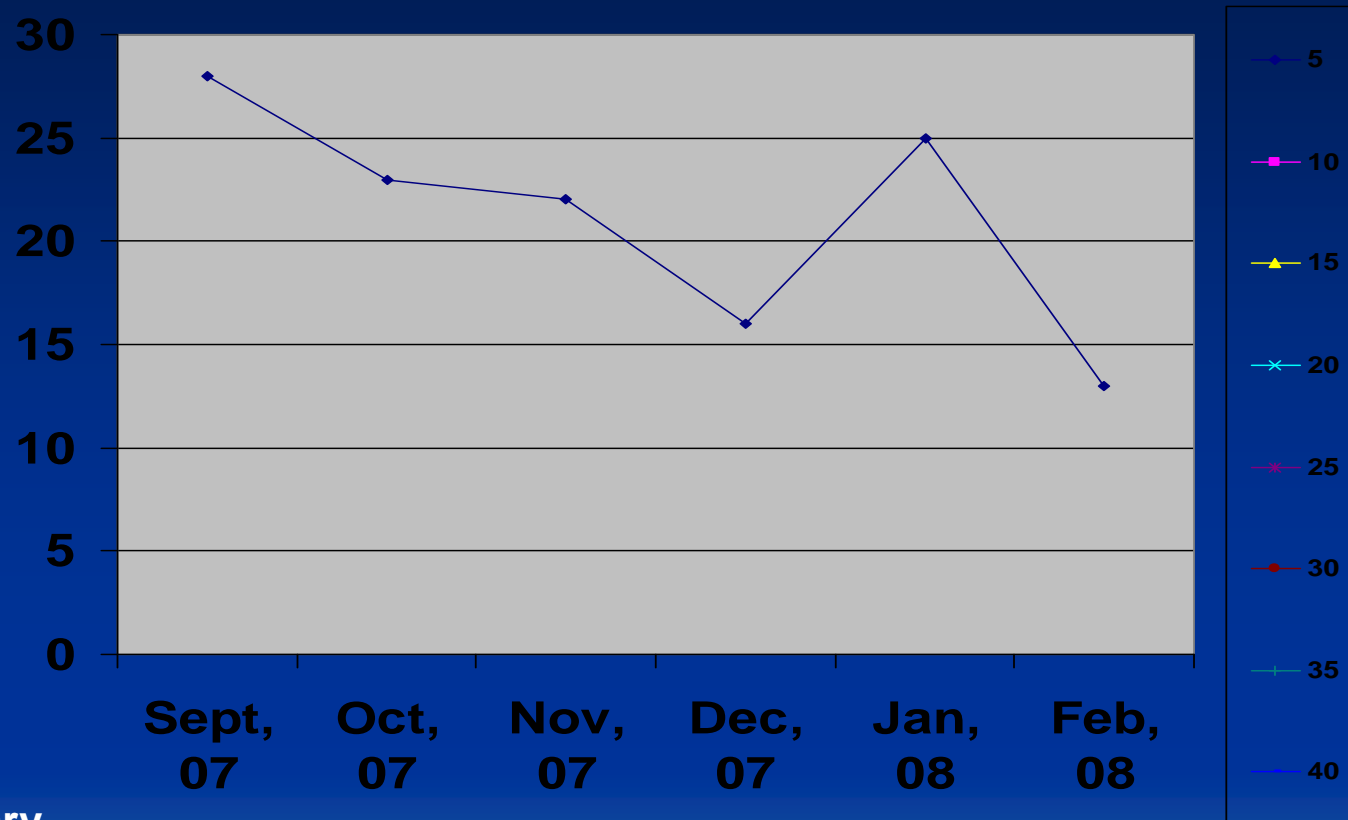


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Skin integrity has been better maintained / managed.

Wounds

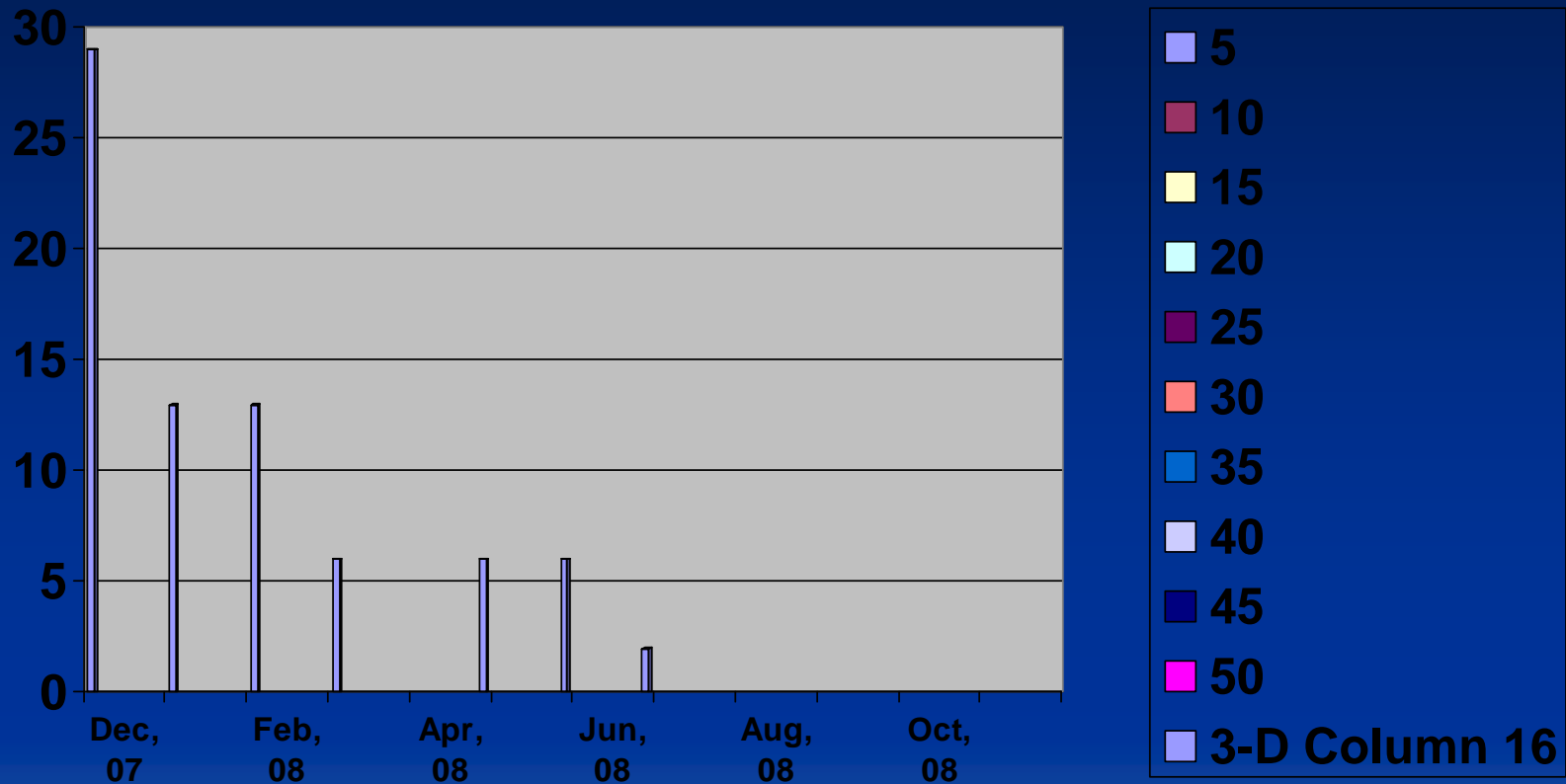


Summary

Since the implementation of High Energy/High protein diet's, nutritional supplements and tasty snack's for residents on a vitamised diet, wounds have decreased from 27 per month to 12. The Lee Total Care program enables us to monitor wounds via their auto wounds list, generated from the program data.

Wound amounts decreased from 27 per month to 12.

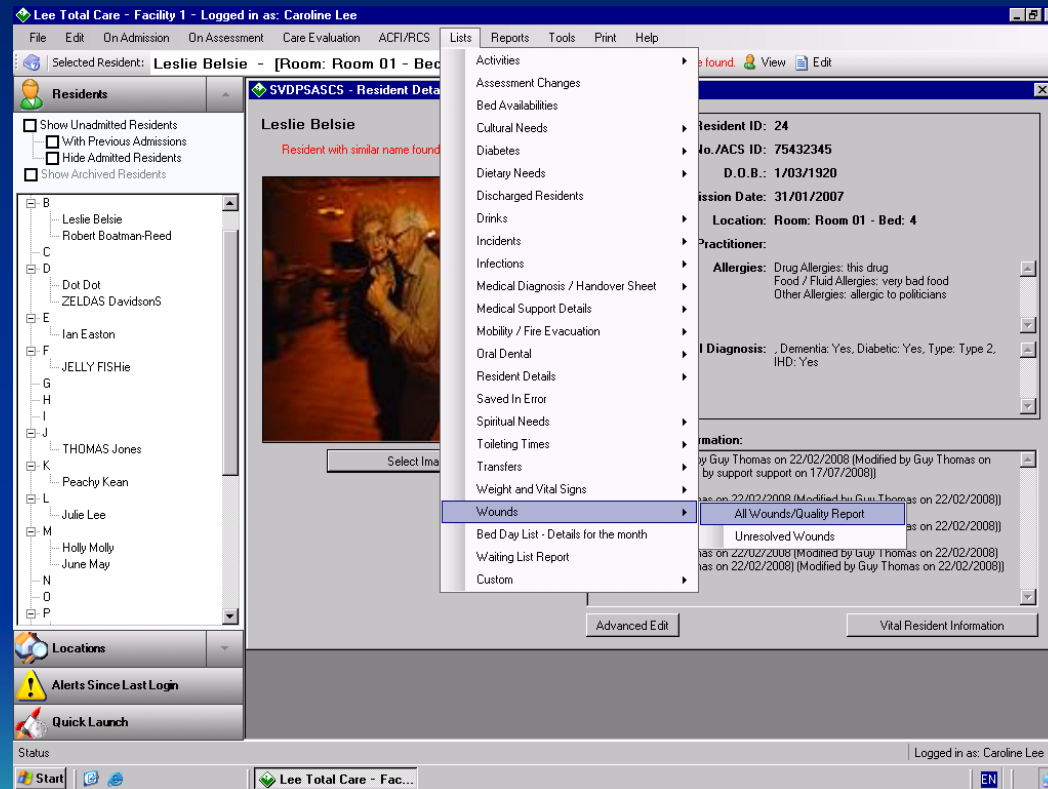
Dietitian Reviews



Summary

Since the introduction of our nutritional program, dietitian reviews have decreased from 27 to 6.

LTC generates a wound care list which saves time again, through instant access to data, saving staff going through each residents' notes.



Unresolved Wound List available from the Lists location or the Quick Launch button for ease of staff access

Lee Total Care - Facility 1 - Logged in as: Caroline Lee

File Edit On Admission On Assessment Care Evaluation ACFI/RCS Lists Reports Tools Print Help

Selected Resident: Ian Easton - [Report Detail]

Residents Locations Alerts Since Last Login Quick Launch

Incident Form

Infection Rates

Weight And Vital Signs

Daily Progress Notes

Care Evaluation 1 - 3 Monthly report

All Residents Calculator

Unresolved Wounds

Staff Message Center

Report Preview

Pages Outline

Page 1 of 1

75%

Unresolved Wounds Report

the following details related to: All Residents: Unresolved Wounds between 13/08/2008 and 13/08/2008

Resident Name	ID No	D.O.B.	Wound Date Reported	Position	Description	Resulting From	Intervention
Mr Easton	7145783466378	28/01/1960	20/07/2008	h/o	Wet/dry	Pressure, Recumbent	
Robert Boulman-Kee	6676	6/02/2008	30/07/2008	Scrum	identifies today as 1cm x 2cm pressure sore	Friction, Pressure	wash with place then site with 5cm bandage and place
Mr D.D	3909393	2/07/1941	19/07/2008	Arm	very bad sore looking thing	Friction, Pressure, Trauma	Wash with with legal every day and if leaking extreme and unresolvable related to

Status

Start Lee Total Care - Facility 1... Report Preview EN

Through the use of the features of the program such as the Progress Notes tagging feature.... we can monitor all entries placing the resident at the centre of our care activities.

LTC virtually does all the monitoring for you.



You can check that :

- *wounds have been dressed*
- *residents have been weighed*
- *documentation has been completed correctly*
- *resident's that need follow up care receive it promptly through the **alerts' functions.***



Being able to view previous days of progress notes at a glance has meant a job that previously took staff a days work in it's self, as they would have to check each individual notes...

is now a 5 minute job!



Handover's have improved through the 'New Progress Notes' function, which is more effective than verbal handovers and the old Chinese whispers syndrome.



Finally the cost effectiveness of the LTC program has meant there is no need for as many staff to monitor care, we can save on dressing cost's, skin integrity products etc.



Staff have now the time to place
“the resident as the person in the centre”

as this program has saved us the
equivalent of *‘a full time RN resource
each week’*

which means in real terms, *staff have the
opportunity and ability* to provide a
person centered approach to care.

