
Licensing Inspection Report (Annual Inspection)

Facility: ALDERWOOD REST HOME

Address: 89 ALDERWOOD LANE
BADDECK NS, B0E 1B0

Date(s) of Inspection: March 8 & 9, 2023

Requirements resulting from licensing inspection:

1. LTCPR 8.3.10
Additional Requirement for Nursing Homes - The licensee shall ensure a least restraint policy and procedures are developed and followed.
On review of a chart of a resident who has a restraint in place, the following documentation that the Home's policy requires was not observed: summary of the assessment leading to the restraint intervention, summary of the alternatives trialed, a physician's order, restraint intervention sheet and restraint checklist. The use of a restraint was also not documented in this resident's care plan. A progress note obtaining consent from the family was observed, as were several progress notes indicating the resident's agitation and low mood since implementation of the restraint.
2. LTCPR 12.1.6
The licensee shall ensure hazardous products that may be harmful to residents are secured at all times and are not accessible to residents. They are stored and disposed of in accordance with established safety practices/manufacturers' recommendations.
3. LTCPR 11.1.6
The licensee shall ensure the home provides a documented, timely orientation for all staff members, volunteers and contracted personnel. The orientation provides the necessary information to support residents in a safe manner and improve their quality of life.
4. LTCPR 6.1.9
Additional Requirements for Nursing Homes - Additional interdisciplinary assessments (including but not limited to Physiotherapy, Dietitian and Recreation) should be completed within two weeks following admission to the home, and on an ongoing basis in accordance with the residents' individual needs.

- 5.** LTCPR 6.3.2
The licensee shall ensure an interdisciplinary care conference, that includes the resident and/or authorized designate and the family members approved by the resident, is conducted within six weeks of admission to the home and annually thereafter, or more frequently as the resident's individual needs require.
- 6.** LTCPR 11.2.4
The licensee shall ensure verification of current licensure, certification, registration or other relevant credentials of staff members (as applicable). Proof of verification is maintained.
- 7.** LTCPR 9.2.2 a
The licensee shall ensure there is a documented Business Continuity Plan that addresses the operational recovery and continuity of services in the face of a disaster, labour disruption or other major outage. The Business Continuity Plan includes the following: hazard, vulnerability and risk assessment, mission critical activities, recovery strategies, loss of electrical power, water, heat, ventilation and waste water services, loss of information technology (computer / telephone / fax) priorities, geographic footprint and pandemic situation (pandemic planning is undertaken and completed in accordance with direction received from the Department.)
- 8.** LTCPR 8.5.4
The licensee shall ensure medications are accounted for, administered and documented in accordance with federal and provincial legislation and professional practice standards.
- 9.** HSCR 38(2), LTCPR 8.5.3
The licensee shall ensure medications are stored in a secure and appropriate manner, accessible only to persons authorized to administer medications.
- 10.** LTCPR 6.2.15
Additional Requirements for Nursing Homes - The licensee shall ensure an interdisciplinary pharmacy committee, consisting of at least the Administrator of the Home, Medical Advisor, Pharmacist, Director of Resident Care and Clinical Dietitian, meets a minimum of every six months.
- 11.** HSCR 38(5)(a)
The administrator of a home for special care licensed by the Minister of Health and Wellness may authorize a resident to store drugs locked in the resident's room if the resident's care plan or treatment plan contains a written clinical assessment authorizing the storage.

12. HSCR 27(10)(a), LTCPR 9.2.8

The licensee shall ensure upon initial employment in a home and a minimum of annually thereafter, every staff member is instructed in and understands the contents of the All Hazards Plan, the Fire Safety Plan, the Business Continuity Plan and the Staff Call Back System Plan as applicable to their individual roles. The administrator of a home for special care is responsible for training staff and residents on emergency plan procedures and conducting emergency drills with staff and residents.

13. LTCPR 6.3.4.b

The licensee shall ensure each resident has a plan of care which is reviewed by staff on a quarterly basis, or more frequently as required, and is updated to reflect the resident's changing needs and interventions.