

Health and Wellness

PO Box 488 Halifax, Nova Scotia Canada B3J 2R8 Tel: 902-424-0104 novascotia.ca/dhw

Licensing Inspection Report (Annual Inspection)

Facility: THE BIRCHES

Address: 7702 HIGHWAY 7 HWY.

MUSQUODOBOIT HARBOUR NS, B0J 2L0

Date(s) of Inspection: September 9, 2020

Requirements resulting from licensing inspection:

1. LTCPR 6.2.16

The licensee shall ensure a stand-alone wound care committee is implemented, or wound care issues/practices are included as a standing agenda item on another appropriate committee (i.e. Quality Committee). The committee shall be interdisciplinary ensuring that wound prevention and management is regularly reviewed and revised to reflect leading practices and provincial direction and identify trends for quality improvement.

2. LTCPR 12.1.3

The licensee shall ensure regularly scheduled environmental services audits are completed to ensure compliance with leading practices for environmental cleaning.

3. LTCPR 6.1.7

Additional Requirements for Nursing Homes - The licensee shall ensure when residents are exhibiting responsive behaviours, the interdisciplinary team assesses the residents to determine the underlying causes of the behaviour, identifies the type and level of risk, and develops, communicates and evaluates the plan of care and outcomes in accordance with section 6.3, Individual Plan of Care.

4. HSCR 18(3)

In every nursing home and nursing care section of a home for the aged where there are thirty or more residents, there shall be at least one registered nurse on duty at all times.

5. LTCPR 11.1.8

The licensee shall ensure formalized performance management processes that evaluate staff members' performance annually, and more frequently as necessary, are in place.

6. LTCPR 6.1.5a

Additional Requirements for Nursing Homes - The licensee shall ensure residents have an interdisciplinary assessment of risk, functional abilities, cognition, nutrition, oral health (see section 6.6), pain and discomfort, falls risk, and recreation, initiated upon admission to the home and completed within two weeks.

7. LTCPR 6.3.4.a

The licensee shall ensure each resident has a plan of care which includes the plan's rationale, measurable and achievable goals, benefits, expected outcomes, detailed actions that the interdisciplinary team shall undertake to meet the resident's identified needs and time frames for evaluation.

8. LTCPR 6.1.5a

Additional Requirements for Nursing Homes - The licensee shall ensure residents have an interdisciplinary assessment of risk, functional abilities, cognition, nutrition, oral health (see section 6.6), pain and discomfort, falls risk, and recreation, initiated upon admission to the home and completed within two weeks.

9. 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.

10. HSCR 27(7), LTCPR 9.2.4.b

The licensee shall ensure fire drills are conducted a minimum of monthly in accordance with direction from the Office of the Fire Marshal.

11. LTCPR 6.1.5a

Additional Requirements for Nursing Homes - The licensee shall ensure residents have an interdisciplinary assessment of risk, functional abilities, cognition, nutrition, oral health (see section 6.6), pain and discomfort, falls risk, and recreation, initiated upon admission to the home and completed within two weeks.

12. LTCPR 6.1.5a

Additional Requirements for Nursing Homes - The licensee shall ensure residents have an interdisciplinary assessment of risk, functional abilities, cognition, nutrition, oral health (see section 6.6), pain and discomfort, falls risk, and recreation, initiated upon admission to the home and completed within two weeks.

13. HSCR 36(1)(c), LTCPR 6.5.6

The licensee shall ensure minimum of three meals and two snacks, one of which is an evening snack, are provided at appropriate intervals throughout the day. Snacks include both food and fluids with options for residents with therapeutic and texture modified diets.

14. LTCPR 6.1.6

Additional Requirements for Nursing Homes - The licensee shall ensure a lift and transfer assessment is completed for residents within 24 hours of admission and as the residents' individual needs change.

15. LTCPR 7.2.6

The licensee shall ensure minutes of resident council meetings are maintained and include resolution or action on identified concerns or issues. Minutes are available and easily accessible for viewing by residents.

16. HSCR 27(11), LTCPR 9.2.4.g

No person shall be maintained in a home for special care or any part thereof that is not approved by a Fire Marshal with respect to fire safety.

17. LTCPR 7.4.2

The licensee shall ensure minutes of management and staff meetings are maintained and include resolution or action on identified concerns or issues. Staff meeting minutes are available and easily accessed by staff.

18. LTCPR 8.4.9.d

The licensee shall ensure the home implements a hand hygiene program which includes the following: evaluating staff adherence with hand hygiene practices though auditing and observation.

19. LTCPR 6.2.8

The licensee shall ensure residents' health status is monitored daily and there is a system in place to recognize indicators of residents' changing needs and to respond accordingly.

20. LTCPR 6.3.7

The licensee shall ensure each resident has an opportunity to complete or provide a personal directive which includes identifying a substitute decision maker. If completed, the personal directive will be placed on the resident record. Otherwise, it is documented on the record that a personal directive was discussed with the resident.

21. 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.

22. LTCPR 6.1.3

The licensee shall ensure results of assessments are documented on the resident record, are communicated appropriately to staff and become the basis for the resident plan of care.