
Licensing Inspection Report (Annual Inspection)

Facility: NOVA SCOTIA HEALTH AUTHORITY
(NORTHUMBERLAND VETERANS UNIT)

Address: 222 HALIBURTON RD.
PICTOU NS, B0K 1H0

Date(s) of Inspection: November 17, 2021

Requirements resulting from licensing inspection:

1. 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.
2. 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.
3. 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 of Health and Wellness.)
4. LTCPR 9.2.10
The licensee shall ensure a written record for fire drills and exercises outlined above, that includes the date, time, location, staff attendance, response times, outcomes, areas for improvement, remedial actions and debriefing, is maintained by the licensee.

- 5.** LTCPR 8.5.9
The licensee shall ensure upon admission, residents and/or authorized designates receive a list of over the counter medications that are provided by the home at no charge to the residents.
- 6.** LTCPR 11.1.5
The licensee shall ensure there is a current job description for each position which is reviewed a minimum of every four years and clearly defines the role, responsibilities and scope of the position. A copy of the current job description is provided to staff members.
- 7.** LTCPR 6.6.1, LTCPR 6.6.2
The licensee shall ensure an oral health assessment is initiated on admission and completed by staff within two weeks. Any risks relating to oral status (such as pain, swelling, bleeding, broken or decayed teeth, debris and food particles) are documented on admission and monitored regularly by staff in order to initiate appropriate referrals to dental professionals, when required and desired by the resident or authorized designate, and to inform daily mouth care planning.
- 8.** 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.
- 9.** LTCPR 6.5.2.d
The licensee shall ensure the following processes are developed and followed: tracking and monitoring intake of meals, supplements and fluids as required.
- 10.** LTCPR 8.5.15
The licensee shall ensure discontinued and expired medications are disposed in a safe and appropriate manner.
- 11.** 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.
- 12.** 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.
- 13.** LTCPR 8.2.3.b
The licensee shall ensure risk management processes that minimize risk to residents and staff are implemented. These include but are not limited to: a process to direct staff in the event of a missing resident.

14. LTCPR 8.2.1.j

The licensee shall ensure policies and procedures that minimize risk to residents, staff, volunteers, visitors and the home are developed and followed. These include but are not limited to: a wound management policy that aligns with these program requirements and the Department of Health and Wellness' Wound Management Policy for Nursing Homes and Residential Care Facilities.