

Personal Care Home (PCH) Standards Unannounced Review (UR) Report

Regional Health Authority: Winnipeg Regional Health Authority

Facility: Saul and Claribel Simkin Centre

Number of Beds: 200

Review Team: Kathy Kelly, Manitoba Health, Seniors and Active Living (MHSAL); Bonnie Lounsbury, (MHSAL); Alison Bell, WRHA; Joanne DiNicola, WRHA

Review Date: March 5, 2019

Report Date: June 4, 2019

Summary of Results:

Standard	Regulation	Follow up
1	Bill of Rights	None
2	Resident Council	None
6	Communication	None
7	Integrated Care Plan	None
8	Freedom from Abuse/Neglect	None
9	Use of Restraints	None
12	Pharmacy Services	None
14	Nutrition and Food Services	Recommended
15	Housekeeping Services	None
16	Laundry Services	None
17	Therapeutic Recreation	None
19	Safety and Security	None
21	Infection Control Program	None
25	Complaints	None

Review Results:

Resident Experience Interview Questions	Resident Responses by Type of Response						
	Never	Sometimes	Most of the time	Always	Not applicable*	Nil response**	
Do you feel the home provides a safe, clean and comfortable space?			1	5			
Do the staff here make sure your needs are met?			2	4			
Do the staff here follow up when you raise things with them?		1	1	4			
Do the staff here treat you with respect?			2	4			
Do the staff here explain things to you?		1	2	3			
Do you like the food here?		2	3	1			
Do you get enough to drink throughout the day?			1	5			
Do you agree with these statements (below):	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Not applicable	Nil response
• There are staff here who I can talk to.		1	2	3			
• The staff know what they are doing.				5	1		
• The place is well run.				5	1		
• I am encouraged to do as much as possible for myself.				3	3		
*Not applicable: question not applicable based on the individual's status							
**Nil response: question not answered or not asked							

Comments:

- Six residents were interviewed.

- Most of the comments centered around the food and the monotony of the menu and lack of variety and the food not being cooked properly.
- Availability of staff was also a comment. One resident's response was that all staff seem to go on break at the same time.
- Some residents interviewed, indicated they had some level of paid companion who are available to meet their requests for assistance and provide social interaction for the resident as opposed to staff. Some paid staff are also health care aides and provide health care aide duties.

Family Experience Interview Questions	Family Member Responses by Type of Response						
	Never	Sometimes	Most of the time	Always	Not applicable*	Nil response**	
Do the staff here treat you with respect?			2	5			
Does the home provide a safe, clean, comfortable environment?			3	4			
Do the staff here make sure your loved one's needs are met?			3	3			
Do the staff here follow up when you raise things with them?			2	4		1	
Do the staff here explain things to you?			4	3			
Does your loved one like the food here?		1	4	2			
Does your loved one get enough to drink throughout the day?		1	3	2		1	
Do you agree with these statements (below):	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Not applicable	Nil response
• There are staff here who I can talk to.				3	4		
• The staff know what they are doing.				4	2		1

• The place is well run.			1	4	2		
• My loved one is encouraged to do as much as possible for themselves.			2	2	3		
*Not applicable: question not applicable based on the individual's status **Nil response: question not answered or not asked							

Comments:

- Seven families were interviewed. Most of the ratings are at the top end of the scale.
- Most of the negative comments were about the food and were similar to the residents' responses but added the portions seem too small.
- Families also commented on the availability of staff to respond to answer call bells etc.
- One family commented that the same issues are brought to management with no resolution but didn't identify the issue(s).

Staff Experience Interview	Staff Member Responses by Type of Response						
	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Not applicable*	Nil response**
To what extent do you agree or disagree with the following:							
• I was provided with a good orientation to my current position.				3	3		
• I have the information and equipment I need to do my job.					6		
• I am kept informed of each resident's current care needs and any necessary changes.				3	3		
• I feel supported by other members of my team.				1	5		
• I am encouraged to share my ideas and concerns with managers and supervisors.					6		
• I receive regular performance appraisals.				5	1		
• I receive training on any new equipment I am required to use.				3	3		

• I am informed of any changes to policies or procedures in a timely manner.				3	3		
• I receive regular training on infection control practices.				4	2		
• I am familiar with the role of the PPCO and know how to make a report.				3	3		
• I have adequate training on Code Yellow/Code Red/Code White and Code Green.				2	4		
*Not applicable: question not applicable based on the individual's status **Nil response: question not answered or not asked							

Comments: Six staff were interviewed from various departments at Simkin Centre. All comments and ratings were positive.

Clinical Incidents:	Reports from RL6 and follow up by the facility were reviewed. All in good order.
General Privacy Issues:	No issues noted by reviewers.

Standard 1: Bill of Rights

Reference: Personal Care Homes Standards Regulation sections 2, 3, and 4

Expected outcome: The resident's right to privacy, dignity and confidentiality is recognized, respected and promoted.

Performance measures:

#	Measure	Review Team Comments
The bill of rights is posted:		
1.03	• in minimum standard CNIB print (Arial font 14 or larger)	Yes

1.04	<ul style="list-style-type: none"> • in locations that are prominent and easily accessible by residents, families and staff 	Yes
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Findings: The bill of rights is posted in various locations in the facility

Follow-up: None

Standard 2: Resident Council

Reference: Personal Care Homes Standards Regulation sections 5 and 6

Expected outcome: Residents have a forum to freely discuss their concerns and issues and the management of the home responds to this same forum.

Performance measures:

#	Measure	Review Team Comments
2.	Resident council minutes are posted as required.	Met

Findings: Council minutes are posted and easily located.

Follow-up: None

Standard 6: Communication

Reference: Personal Care Homes Standards Regulation section 14

Expected outcome: Each resident's current care needs, including any changes, are communicated completely and accurately to all staff who require the information to provide safe, appropriate care to the resident.

Performance measures:

#	Measure	Review Team Comments
There are standardized processes in place, and supporting evidence that processes are consistently followed, to ensure ongoing, accurate and timely communication of each resident's needs including:		
6.01	• changes to current care plan	Present.
6.02	• between staff at change of shift	Shift to shift meeting were observed by all reviewers.
6.03	• when a transfer to another unit or facility is required	Completed when required.

Findings: Key information appeared to be shared between incoming and outgoing staff.

Follow-up: None

Standard 7: Integrated Care Plan

Reference: Personal Care Homes Standards Regulation sections 11, 12, 13 and 14

Expected outcome: Beginning at admission, residents consistently receive care that meets their needs, recognizing that residents' care needs may change over time.

Performance measures:

#	Measure	Review Team Comments
As part of the facility's continuous quality improvement/risk management activities, there is evidence that care plans audits:		
7.43	• occur at least annually	Audits are completed with recommendations for follow up, with documentation of completed action plans.
7.44	• are reviewed and analyzed	
7.45	• demonstrate that recommendations for improvement were made, if required, based on the analysis	
7.46	• demonstrate that recommendations were implemented and followed up	

Findings: Review of integrated care plans indicated that, generally, the care plans were individualized and specific to the residents needs. Audits were consistent with the review findings.

Follow-up: None

Standard 8: Freedom from Abuse/ Neglect

Reference: Personal Care Homes Standards Regulation section 15

Expected outcome: Residents will be safeguarded and free from abuse or neglect.

Performance measures:

#	Measure	Review Team Comments
8.06	The Protection for Persons in Care Act information is posted in locations that are prominent and easily accessible by residents, families and staff.	Yes.

Findings: Present in many locations

Follow-up: None

Standard 9: Use of Restraints

Reference: Personal Care Homes Standards Regulation, sections 16, 17 and 18, and the Manitoba Provincial Ministerial Guidelines for the Safe Use of Restraints in Personal Care Homes.

Expected outcome: Residents are restrained only to prevent harm to self or others. When a restraint is necessary it is correctly applied and the resident in restraint is checked on a regular basis.

Performance measures:

#	Measure	Review Team Comments
General Observation	Are there any inappropriate restraints in use?	None observed.
As part of the facility's continuous quality improvement/risk management activities, there is evidence that audits of the use of restraints:		
9.34	<ul style="list-style-type: none"> occur at least annually 	Audits are completed with recommendations for follow up, with documentation of completed action plans.
9.35	<ul style="list-style-type: none"> are reviewed and analyzed 	
9.36	<ul style="list-style-type: none"> demonstrate that recommendations for improvement were made, if required, based on the analysis 	
9.37	<ul style="list-style-type: none"> demonstrate that recommendations were implemented and followed up 	

Findings: Restraint documentation was fully completed.

Follow up: None

Standard 12: Pharmacy Services

Reference: Personal Care Homes Standards Regulation sections 24, 25 and 26

Expected outcome: Residents receive prescribed treatments and medications in accordance, with their needs and their treatments/medications are correctly administered and documented.

Performance measures:

#	Measure	Review Team Comments
There are designated medication storage areas that are:		
12.10	• secure	Met

Findings:

- Several medication passes observed by different reviewers. No issues noted.
- Hand hygiene performed well. Good interaction with residents noted.

Follow-up: None

Standard 14: Nutrition and Food Services

Reference: Personal Care Homes Standards Regulation section 28

Expected outcome: Residents nutritional needs are met in a manner that enhances their quality of life.

Performance measures:

#	Measure	Review Team Comments
Policies and procedures for the nutrition and food services department minimally include direction for:		
14.20	Menu choices are posted daily for the residents to view, at an appropriate height and displayed using minimally size 14 Arial font.	Daily menus posted on every unit as well as hand written in a couple of places on unit white boards. One unit did not have the white board updated. This was identified by the residents as well. Weekly menus were at the nursing desk.
14.22	There is a permanent record of each resident's likes and dislikes that is readily accessible to dietary, nursing and recreation staff.	Available to staff.

#	Measure	Review Team Comments
14.23	Resident's likes and dislikes are accommodated to the extent possible.	
14.24	Residents are served meals in a manner that promotes independent eating.	Each place setting had paper napkins and placemats.
14.25	Meals are presented in a courteous manner.	There were a couple of issues in different dining rooms. Examples include: One family member was seen standing, feeding her family member. Staff not placing meals or soup where resident can access meal or soup in a cup. Some meals were served before residents were brought to the dining room and were not covered. Food served too early to residents who requires assistance.
14.26	Positioning and assistance with eating is individualized as needed.	
Assistance with eating is provided, when required:		
14.27	• in a manner that promotes dignity	Use of teaspoons in place. Residents who were provided assistance and those who were independent did not appear rushed. There are many companions providing meal assistance as well as staff and these interactions appeared appropriate.
14.28	• with specific regard to safe feeding practices	
14.29	• in a way that encourages interaction with the person providing assistance	
14.30	Residents are given sufficient time to eat at their own pace.	

Findings:

- Several dining rooms observed at supper time.
- Given several dining rooms were observed, the overall dining experience appeared to be positive.

Follow-up recommended: Pass by observations of management and supervisors of dining rooms at different meal times to ensure companions/family members are applying safe feeding techniques.

Standard 15: Housekeeping Services

Reference: Personal Care Homes Standards Regulation Section 29

Expected outcome: The residents' environment is safe, clean and comfortable and is consistent with resident care needs.

Performance measures:

#	Measure	Review Team Comments
15.01	The facility is clean and odour free.	No issues observed.
15.03	There is documented evidence that the tub and bathing equipment cleaning process is completed after each resident use.	
15.04	Upon inspection all shared equipment is found to be clean.	

Findings: Equipment was observed to clean. Housekeeping audits were completed with recommendations and follow up where identified in the audit.

Follow-up: None

Standard 16: Laundry Services

Reference: Personal Care Homes Standards Regulation section 30

Expected outcome: Residents have a supply of clean clothing and linens to meet their care and comfort needs.

Performance measures:

#	Measure	Review Team Comments
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16.10	Soiled laundry is not placed on the floor of any unit nor in the laundry area.	No issues observed.
16.11	Soiled laundry is kept separate from clean linen throughout the facility.	

Findings: Facility maintains correct protocols for soiled laundry.

Follow-up: None

Standard 17: Therapeutic Recreation

Reference: Personal Care Home Standards Regulation Section 31

Expected outcome: Residents participate in therapeutic recreational programming that enhances their quality of life.

Performance measures:

#	Measure	Review Team Comments
Information about recreation programs:		
17.11	• is posted in prominent, resident-accessible locations throughout the home	Yes
17.12	• is clear and easy for residents to read	Yes

Findings:

- Recreation activities were posted on unit white boards and in several locations on paper.
- Audits are completed with recommendations for follow up and documented of completed action plans.

Follow-up: None

Standard 19: Safety and Security

Reference: Personal Care Homes Standards Regulation sections 33 and 34

Expected outcome: Residents are provided a safe, secure, and comfortable environment, consistent with their care needs.

Performance measures:

#	Measure	Review Team Comments
19.01	The temperature in residential areas is a minimum of 22°C.	Ambient temperatures comfortable.
19.02	Domestic hot water, at all water sources that are accessible to residents, is not less than 43°C and not more than 48°C.	Logs were provided and domestic water in resident accessible locations is with the required temperature range.
19.05	There is an easily accessible call system in all resident washrooms.	No issues noted.
19.06	There is a call system in all bathing facilities that is easily accessible from all areas around the tub.	
19.07	All open stairwells are safeguarded in a manner which prevents resident access.	
19.08	All outside doors and stairwell doors accessible to residents are equipped with an alarm or locking device approved by the fire authority under the Manitoba Fire Code.	
19.10	Handrails are properly installed and maintained in all corridors.	
19.12	All potentially dangerous substances are labeled and stored in a location not accessible to residents.	Not all doors that should be locked, were secure. One tub rooms was found unsecured on one unit.
19.13	Combustible materials are stored separately and safely in a container that does not support combustion.	No issues noted.
Upon inspection/observation all equipment is;		
19.14	• safe for use	No issues noted.
19.15	• safely stored	

#	Measure	Review Team Comments
19.16	<ul style="list-style-type: none"> used in a manner that protects residents 	
All exits are:		
19.21	<ul style="list-style-type: none"> clearly marked 	No issues noted.
19.22	<ul style="list-style-type: none"> unobstructed 	

Findings: Facility is clean and well maintained.

Follow-up: None

Standard 21: Infection Control Program

Reference: Personal Care Homes Standards Regulation section 36

Expected outcome: Residents are protected from the spread of infection by an infection control program.

Findings: No issues noted.

Follow-up: None

Standard 25: Complaints

Reference: Personal Care Homes Standards Regulation section 40

Expected outcome: A complaint process is available to residents and their representatives to address concerns.

Performance measures:

#	Measure	Review Team Comments
Directions related to complaint processes:		
25.02	<ul style="list-style-type: none"> are posted in a prominent location in the home 	Present
25.03	<ul style="list-style-type: none"> include the position and contact information of the appropriate person (people) 	Present

Findings: Complaints from RL6 were reviewed and timely follow up noted by the facility.

Follow-up: None