

**MINISTRY OF HEALTH AND LONG TERM CARE 2014 RESIDENT QUALITY INSPECTION – WENTWORTH LODGE**

<b>RQI Finding</b>	<b>Description</b>	<b>Action</b>
WN #1 Resident Rights	All residents are to have individualized plans of care and to have their personal health information kept confidential.	One resident home area during the dinner time meal service were not all offered choice. Issue addressed and fixed same day and care plans updated.  Medication pouches were disposed on in garbage on medication cart. Process issue addressed and fixed same day - policy implemented to denature all strip packages.
WN #2 Plan of Care	Written plan of care sets out planned care, goals and clear direction for staff.	This is the most commonly issued WN across Ontario. Review of care planning with staff and increased audits by Nursing Leadership instituted.
WN #3 Equipment Maintained in safe condition and in good repair	Two bath chairs were noted not to be in good condition.	Replacement of 2 bath chairs is complete.
WN #4 Bedrails	Where bedrails are used, regardless of size or number, the resident must be assessed to minimize risk and bedrails included in the plan of care.	This issue required considerable clarification from Compliance to understand expectations. This area of non-compliance is the most commonly issued Compliance Order in the province in 2014.
WN #5 Policies	Policies that are in place are to be	Policy implemented same day issue

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	followed.	<p>was identified at medication pass to denature medication strip packaging.</p> <p>New process developed to circulate minutes within 10 days to comply with policy / LTC Homes Act.</p>
WN #6 Oral Care	One resident indicated that he was missed being brought to on-site dental clinic.	Reviewed process with Nurse Leaders and nursing team.
WN #7 & 8 Powers of Resident and Family Councils	If either Council advises the Home of concerns or recommendations the Home will respond in writing within 10 days.	Both Councils asked that the written notification just be included and reviewed at the next monthly meeting. This is considered non-compliance and therefore minutes are now circulated with Home’s response within 10 days.
WN #9 Infection Prevention and Control	Staff must participate in the implementation of this program.	In one RHA it was noted in the tub room that there were used and un-labelled items. Review with staff and increased audits have been completed.