

MINISTRY OF HEALTH AND LONG TERM CARE 2016 RESIDENT QUALITY INSPECTION – WENTWORTH LODGE

RQI Finding	Description	Action
WN #1, VPC #1 – Plan of Care	The written plan of care did not give clear direction to staff and others providing direct care to the resident as it related to toileting, bladder incontinence and transfer status.	<p>Review care planning principles with all registered staff.</p> <p>Make revisions to standardized care plan entries to be resident specific and clear.</p> <p>Nursing Leadership to audit care plan following completion of documentation due date. Follow up with coaching / performance management for patterns of non-compliance.</p>
WN #2, VPC #2 – Compliance with Policies	Personal Support Workers (PSW) Shift Roles and Responsibilities were not followed by staff in relation to “reporting off pertinent resident information to 3-11 pm staff to transfer care to the oncoming shift.”	Lodge protocol for all PSW’s to follow PSW shifts roles and responsibilities. Staff will continue with current practice and ensure quality of care. Staff will increase audit activities to ensure adherence to internal policies and protocols.
WN #3, VPC #3 – Bed Rails	One resident was not assessed for the use of bed rails as a personal assistance safety device.	<p>Review with registered staff findings on RQI and review compliance expectations related to same.</p> <p>Audit care plans more consistently and</p>

		frequently as well as required assessments.
WN #4, VPC #4 – Skin and Wound Assessment	<p>Residents exhibiting altered skin integrity shall receive an initial assessment and will be assessed weekly by a member of the registered nursing staff.</p> <p>One resident did not have weekly wounds assessed but dressings were completed as per protocol.</p>	<p>Review of Lodge policy reviewed at Mandatory Training. Monitoring is ongoing.</p> <p>Nursing Leadership to complete weekly audits for all wounds. Follow up with coaching / performance management for patterns of non-compliance.</p>
WN #5 – Safe and Secure Environment	The door to the Infection Control Practitioner’s office was open and unlocked.	The door system was changed within 2 hours of the concern being brought forward. Door now has automatic close system with automatic lock when closed (similar system to medication room doors).