



Health

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September 7, 2022

Mr. Mike Nader
Chief Executive Officer
Winnipeg Regional Health Authority (WRHA)
650 Main Street
Winnipeg MB R3B 1E2

Dear Mr. Nader:

**RE: Focused Review (FR) Report for The Convalescent Home of Winnipeg
Personal Care Home (PCH)**

A focused review was completed at The Convalescent Home of Winnipeg PCH for which a report is attached.

The identifier numbers on the Focused Review Report are for the following:

I.D. # LCB342 Heather Roos – Manitoba Health;
I.D. #WRHA7851 Joanne DiNicola– WRHA.

The facility's performance has met the PCH Standards and no follow-up is required.

Please share this information with the facility. Thank you for your ongoing contribution and participation in the PCH Standards Review process.

Sincerely,

Brent Wynnyk
Director
Licensing and Compliance Branch

cc. Gina Trinidad, WRHA
Adrian Salonga, WRHA
Laurel Rose, WRHA
Wendy Berriault, WRHA
Heather Roos, MB Health

Personal Care Home (PCH) Standards Focused Review (FR)* Report

Regional Health Authority: Winnipeg Regional Health Authority

Facility: The Convalescent Home of Winnipeg

Number of Beds: 84 beds

Review Team: I.D. # LCB342 – Manitoba Health

I.D. #WVRHA7851 – Winnipeg Regional Health Authority

Review Date: August 4, 2022

Report Date: August 31, 2022

*The focused review (FR) is an abbreviated standards review format developed for use in 2022 at all personal care homes (PCHs) where a standards review was completed during the previous year (i.e. 2021). The scope of review activities in the FR varies somewhat from site to site based on findings from the previous review. All FRs include, at minimum, a safety and security tour of the PCH, assessment of care delivery and programming observed on site, and one-to-one interviews with a sample of residents.

Summary of Results:

Standard	Regulation	Follow-Up
1	Bill of Rights	None
2	Resident Council	None
6	Communication	None
8	Freedom from Abuse/Neglect	None
12	Pharmacy Services	Recommended
14	Nutrition and Food	Recommended
15	Housekeeping Services	None
16	Laundry Services	None
17	Therapeutic Recreation	None
19	Safety and Security	Recommended
21	Infection Control Program	None

Resident Experience

Resident Experience Questions	Resident Responses by Type of Response					
	Always	Usually	Sometimes	Rarely	Never	No Comment
1. Do you find this home to be clean and comfortable?	5	1				
2. Do you feel safe in this home?	5	1				
3. Do the staff here provide you with the kind of care you need?	5		1			
4. Do the staff here take the time to talk to you and answer your questions?	5					1
5. Are you treated respectfully by the people who work here?	3	2	1			
6. Are you encouraged to do as much as possible for yourself?	5	1				
7. Do you like the food here?	1	2	3			
8. Are you offered enough to drink between meals and in the evening?	5	1				
9. Do you enjoy the recreational activities here?		1	1			4
10. Do you feel the facility has done a good job in protecting you from COVID-19?	2	1	1			2

If you could change three things about this home, what would you change? (all responses are included below):

- I can't think of anything.
- Better bathroom – door frame too small. A new building. The HCAs are wonderful.
- Outings – recreation for all of us to go out. Wants to go home.
- It's okay, staff are friendly, feels well looked after.
- "Younger women". Resident has a great sense of humor and is very satisfied living at the home.
- I love this place. I love the people, I love seeing people. I want to be outside more.

Additional Comments:

- Asked for an Xray of knee, never had any follow-up, does not know what happened. Resident was told that she was "no spring chicken".

Six residents were interviewed. Some general comments are included here.

Generally, they find the home to be clean. The residents feel safe at the home. There were comments that the staff work hard, sometimes they felt not checked as often as needed when there was incontinence. The residents commented that they were treated respectfully, most of the time. Comments about the food include that they get tired and bored with the menu repeating itself and are happy that family bring in food or that they can use a delivery service to get a take out meal. Some residents find the food too spicy. Not all residents like to participate in recreation, preferring to stay in their rooms, watching television. Others commented that they enjoy the exercise programs.

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	<ul style="list-style-type: none"> in minimum standard CNIB print (Arial font 14 or larger); 	No concerns noted at the time of the review.
1.04	<ul style="list-style-type: none"> in locations that are prominent and easily accessible by residents, families and staff; 	The Bill of Rights was posted throughout the home.
1.06	<ul style="list-style-type: none"> residents are sheltered, fed, dressed, groomed and cared for in a manner consistent with their needs. 	Residents were comfortably dressed, groomed and sitting in dining chairs or adaptive chairs based on their physical needs.

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.	Minutes from the June 7, 2022 were posted and there were plans for the next Resident Council meeting scheduled for August 2022.

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
<p>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:</p>		
6.02	<ul style="list-style-type: none"> between staff at change of shift. 	Shift handover was not observed. One of the nurses explained that the report process includes the day nurse giving a verbal report to the evening nurse and the HCAs.
6.05 6.06	The method of communicating the integrated care plan to direct care staff ensures privacy of the resident.	Activity of daily living care plans were covered and located in the resident bathrooms.

Findings: There were no care conferences held on the day of the review. Privacy of the medication administration record was maintained when the staff stepped away from the medication cart to administer medications to the residents.

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.	Information posters on the Protection for Persons in Care Act were located on the units throughout the home.

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
12.10	• secure.	The medication cart was stored in the hallway near the nursing desk.

There are designated medication storage areas that are:

Findings: The medication cart is locked and stored in the hallway. It is suggested that the home consider a locking mechanism that would anchor the medication cart to the wall so that no one could remove the medication cart from the area near the desk. The half door at the desk secures the medication cupboard that contains medication and supplies. The half door was left unlocked and open throughout the noon medication pass.

The medication pass was observed in three areas. Appropriate hand hygiene practices were followed. Two client identifiers were used including the resident photo and staff familiarity. Appropriate preparation, administration and sign off of the medications was completed. Privacy of the medication administration record was maintained. The cart was locked while the administration of the medications was completed. There were a number of interruptions noted throughout the medication pass done by visiting family

members and staff asking questions of the nurses. The nurses were knowledgeable and patient with the residents as they completed the medication administration.

Follow-up: Recommended.

It is recommended that the home consider a locking mechanism to secure the medication carts that are located in the hallway next to the desk. The half doors behind the desk should be locked at all times.

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
14.15	At least three meals or equivalent are offered to each resident, each day, at reasonable intervals.	Three meals are provided throughout the day and evening to the residents.
Between meal fluids and nourishments are offered to every resident:		
14.16	between breakfast and lunch (minimally fluids must be offered);	Water in thermal cups was provided to the residents mid-morning.
14.17	between lunch and supper, and,	Beverage and snacks were offered mid-afternoon.
14.18	not less than two hours after the evening meal.	Beverage and snacks are offered prior to the residents going to bed for the night.
14.20	Menu choices are posted daily for the residents to view, at an appropriate height and displayed using minimally size: 14 Arial font.	The menu was posted in the dining room and on the units. The print was quite small on the units and may be challenging for some of the residents to read.
14.23	Resident's likes and dislikes are accommodated to the extent possible.	In the large dining room on the main floor, the residents have place cards at their dining spots that indicate their diet, beverages, likes and dislikes. This was not seen on the floors where the residents were served their meal from the hot carts.

#	Measure	Review Team Comments
14.24	Residents are served meals in a manner that promotes independent eating.	Dietary staff serve the meals in the dining room and offer the residents choices for their beverage and dessert, but not their main meal. On the other floors, dietary staff served the residents their meal from the hot cart. Residents on the units sat in chairs at dining room tables or were in lounge chairs and wheelchairs at over bed tables.
14.25	Meals are presented in a courteous manner.	Staff were very kind to the residents through the meal service.
14.26	Positioning and assistance with eating is individualized as needed.	Staff provided assistance with seating and with the meal service.
Assistance with eating is provided, when required:		
14.27	<ul style="list-style-type: none"> • in a manner that promotes dignity; 	Staff were respectful in providing support to the residents.
14.28	<ul style="list-style-type: none"> • with specific regard to safe feeding practices; 	Staff sat beside the residents if assistance with the meal was required. Appropriate utensils were used to assist the residents.
14.29	<ul style="list-style-type: none"> • in a way that encourages interaction with the person providing assistance. 	There was quiet interactions between the staff and the residents.
14.30	Residents are given sufficient time to eat at their own pace.	Meals service and assistance with the meals was not rushed.

Findings: The dining room on the main floor was spacious, warm with good natural light coming through large windows. Physical distancing of the residents was maintained. The dining areas for the residents on the other floors were small and residents were seated very close to one another. The dining room tables were set with cups and cutlery mid morning. Meals were pre-served from the hot carts on the units. Food was served prior to a staff member being there to assist the resident. The food that was served at the time of the review was not what was posted on the menu board. The hot carts were always left plugged in and turned on, on the units.

Follow-up: Recommended.

It is recommended that meal delivery service be reviewed on the units to accommodate residents' preferences and choices. The seating arrangements for meal service could possibly be reconfigured to enhance space usage.

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.	Generally, the building was clean, with some odours noted.
15.03	There is documented evidence that the tub and bathing equipment cleaning process is completed after each resident's use.	Water temperatures, resident baths and tub cleaning were documented by the staff.
15.04	Upon inspection all shared equipment is found to be clean.	Shared equipment appeared to be clean.

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
16.10	Soiled laundry is not placed on the floor of any unit nor in the laundry area.	Soiled linen was not found on the floor in any areas of the home.
16.11	Soiled laundry is kept separate from clean linen throughout the facility.	Clean linen and incontinent products were found on carts in resident care areas and in the storage room. Soiled linen was placed in four bag carts on the units.

Findings: The four bag carts were not hands free. It is suggested that the home modify the carts with foot pedals so that they are "hands free" for the staff. This supports good infection control practices.

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	<ul style="list-style-type: none"> is posted in prominent, resident-accessible locations throughout the home; 	Recreational calendar of activities were posted on bulletin boards in the home. The day's activities were also posted for the residents to see. On the day of the review, the morning activity was stretches and the afternoon was Fun in the Sun.
17.12	<ul style="list-style-type: none"> is clear and easy for residents to read. 	No concerns noted at the time of the review.

Findings: There were bunnies seen in a fenced in area on the main floor. The second elevator was currently decommissioned for repairs at the time of the review. There was lovely recreation space on the first floor where there is a kitchenette and an area set up like a living room. There are lovely outdoor spaces on the ground floor and a gazebo and outdoor space on the second floor.

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.	Air temperatures in residential areas ranged from 20.5°C to 24.7°C.
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.	Tub water temperatures at the time of the review were 38.5°C, 46.3°C and 40.6°C. Water temperatures in resident room bathrooms ranged from 35.6°C 53.1°C. Of the 15 water temperatures taken at the time of the review, there were two temperatures that were found to be higher than the acceptable range.

#	Measure	Review Team Comments
19.03	There is documented evidence of frequent monitoring (minimally once per week) of domestic hot water temperatures at locations accessible to residents.	The water logs were reviewed and there were a number of notations that registered the water temperature that exceeded the acceptable range. There were not any notations indicating if an adjustment had been made to reduce the water temperature for that area.
19.04	There is an easily accessible call system in all resident rooms.	No concerns noted at the time of the review.
19.05	There is an easily accessible call system in all resident washrooms.	No concerns noted at the time of the review.
19.06	There is a call system in all bathing facilities that is easily accessible from all areas around the tub.	No concerns noted at the time of the review.
19.07	All open stairwells are safeguarded in a manner which prevents resident access.	Access cards were used to access stairwells and to the outside space on the second floor.
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.	No concerns noted at the time of the review.
19.10	Handrails are properly installed and maintained in all corridors.	No concerns noted at the time of the review.
19.11	Grab bars are properly installed and maintained in all bathrooms and bathing facilities.	No concerns noted at the time of the review.
19.12	All potentially dangerous substances are labelled and stored in a location not accessible to residents.	There were a number of shampoos and lotions accessible to residents in resident bathrooms and in the tub room that is not locked when not in use.

#	Measure	Review Team Comments
19.13	Combustible materials are stored separately and safely in a container that does not support combustion.	Portable oxygen was stored in a separate secured room.
There is documented evidence for all equipment, including building systems, that demonstrates completion of:		
19.17	<ul style="list-style-type: none"> as needed repairs; 	Wear and tear noted on some walls and door frames.
19.18	<ul style="list-style-type: none"> preventative maintenance. 	It appears there were registers that must sweat or leak as there were towels placed on the floor under a number of registers.
All exits are:		
19.21	<ul style="list-style-type: none"> clearly marked; 	Exits were clearly marked.
19.22	<ul style="list-style-type: none"> unobstructed. 	Exits were kept cleared and unobstructed.

Findings:

Follow-up: Recommended.

It is recommended that when the water temperature log entries are not within the acceptable range, that adjustments made be noted in the log book.

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.

Performance Measures:

Findings: Screening and tracing of visitors takes place at the front entrance. There was personal protective equipment including masks, gloves and goggles available for staff and visitors. There were sanitizing wipes dispensers on the units. Hand sanitizer is available in the corridors and in the residents' rooms. Physical distancing was maintained in first floor dining room, however is challenged on the other floors. There was infection, prevention and control signage seen throughout the building including donning and doffing, fight the flu and hand hygiene. It was currently up to the staff whether they wore goggles when providing care to the residents. Housekeeping staff were seen cleaning on the units, including the high touch areas. Staff have personal lockers in the basement and break areas where they were able to practice physical distancing.

Follow-up: None.

