

Chapter 4

Department of Family and Community Services

Nursing Home Services

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Department of Family and Community Services Nursing Home Services

Background

4.1 When an individual lives in a nursing home, the person, their family, their friends and society trust the facility to provide safe and proper care. New Brunswick has legislation requiring nursing homes to have a license and follow the operating standards. The purpose of our work was to see if government is enforcing this legislation.

4.2 “Nursing homes provide service to individuals whose care requirements exceed the support available from family and other community care providers, but who are not at the point of requiring hospital ... care” (Nursing Home Services - Annual Statistical Report). Nursing homes are privately owned by non-profit organizations, which are operated by volunteer boards of directors. There are sixty-one nursing homes in the Province providing approximately 4,100 beds. Nursing homes range in size; the smaller homes have less than fifty beds and the larger homes have more than one hundred beds. The largest nursing home in the Province has two hundred beds.

4.3 The government recognizes the significance of nursing homes and has control over them in the following ways.

- Government controls construction, renovations and the number of beds through legislative requirements and capital funding.
- Government licenses all nursing homes and inspects them to measure compliance with standards established to secure a safe environment and proper care.
- Government controls admissions to nursing homes. An individual is assessed and approved before admittance. The eligibility

assessment for admission looks at the individual's long-term health care and social needs.

- Government provides financial assistance to eligible nursing home residents and to nursing homes for pre-approved expenses. Individuals receive a separate financial assessment to determine their ability to pay for care requirements.

4.4 The *Nursing Homes Act* (Act), assented to in May 1982, states the Minister's authority and the duties of the nursing home's operator. The *General Regulation - Nursing Homes Act* (Regulation), effective since 1985, states additional requirements. Some of the legislative requirements are standards that nursing homes must meet. The standards cover areas such as: licensing, care services, medical and dental care, food service, resident records, written policies, financial reporting, employees and the building.

4.5 The Department of Family and Community Services (Department) is responsible for government's involvement with nursing homes. The Department is one of the government's largest, employing approximately 1,500 staff members within several different operating sections, including Nursing Home Services (NHS).

4.6 "Nursing Home Services is responsible for the nursing home program. It sets and monitors policies and standards, inspects nursing homes for licensure and provides subsidies for eligible individuals who cannot cover the full cost of nursing home care. In addition, Nursing Home Services provides consultation services to the nursing homes" (Nursing Home Services - Annual Statistical Report). The NHS budget is approximately \$127 million. Most of these funds are distributed to nursing homes as residents' subsidies (\$122 million in 2003). Approximately eighty percent of residents require government subsidy.

4.7 Nine staff members work within NHS in the Department's central office. We were told that their main activity is performing inspections and serving as liaison with the nursing homes. They also serve on committees; liaise with other groups within the Department (Budget and Financial Reporting, Audit Services and Long Term Care Services); and help address significant issues, such as the strike in 2001 and the resident care needs project in 2002.

4.8 NHS is a mature program. The legislation was established in 1982, with few minor changes since then. There have been no newly established nursing homes since 1986 and the number of nursing homes has been stable since 1997.

4.9 As an Office, we are interested in issues involving the protection of vulnerable people and public safety. We provide information that can be used to hold the government accountable for legislation created to ensure the safety of the people of New Brunswick. Our interest in accountability for safety legislation led us to select the Nursing Home Services program for audit. This program is responsible for the safety of a vulnerable group, seniors and adults with disabilities, who may not be able to speak for themselves regarding the condition of their environment and the care they receive.

Scope

4.10 The objective for this audit was:

To determine if the Department of Family and Community Services has appropriate practices to:

- ensure that licensed nursing homes are complying with the Province's legislation for nursing homes;*
- and*
- ensure the Province's legislation and the departmental policies for nursing homes are reviewed and amended on a regular basis.*

4.11 To focus our efforts, we developed seven criteria to use as the basis for our audit. We discussed them with the Department and it was agreed that they were reasonable. The criteria addressed the following:

- licensing nursing homes;
- conducting inspections to measure compliance with the operating standards;
- enforcement actions when nursing homes do not comply with the standards;
- policies and procedures for the program;
- reviewing and amending the legislation, policies and procedures;
- and
- being accountable by reporting on the effectiveness of the program for licensing nursing homes.

4.12 Our work included the following:

- reviewing relevant documents;
- interviewing staff members of the Department;
- visiting two nursing homes and observing a two-day departmental inspection at one of these homes;
- testing a sample of nursing home inspection files; and
- analyzing program information.

4.13 The audit did not evaluate the quality of the standards.

4.14 We compared the audit evidence against the audit criteria to develop the findings, conclusions and recommendations presented in this chapter.

Results in brief

4.15 **The Department of Family and Community Services does not have appropriate practices to ensure that licensed nursing homes are complying with the Province's legislation for nursing homes. Licensing of nursing homes is not conditional upon compliance with the legislation. Issuing a license to a nursing home is an administrative task that does not incorporate inspection results or incidents reported by the nursing homes or the public. While all sixty-one nursing homes are licensed to operate, the intent of the legislation is not being applied because the license that is publicly displayed at nursing homes is not an indication that the nursing home has met the government's standards. In addition, there are inconsistencies between the legislation and licensing practices.**

4.16 **Comprehensive inspections are performed by registered nurses at all nursing homes to measure compliance with operating standards. We found the frequency of inspections to be inconsistent and inadequate, and the inspection report was not always issued promptly.**

4.17 **While follow-up on inspection results is done and sometimes results in the timely correction of infractions, we found the Department's enforcement actions are inadequate. As a result, there is a high level of non-compliance with the standards and it is rare that an inspector finds a nursing home complying with all of the standards.**

4.18 **The Department does not have documented policies and procedures for licensing and inspecting nursing homes and enforcing the legislation. We identified the need for policies and**

procedures in two additional areas: processing complaints reported by the public and addressing major incidents (such as infectious outbreaks or events involving the police, coroner or fire department) reported by the nursing homes.

4.19 The responsibility for reviewing the legislation and other documentation for the program is clearly assigned and it has been reviewed. The legislation was reviewed during 2001 and 2002 and the need for revisions was determined. The inspection report was reviewed, resulting in a revised report dated March 2001. The directives manual is currently under review.

4.20 The Province's legislation for nursing homes is in need of amendment. Despite the Department's own review of the legislation in 2002 identifying the need for revisions, amendments have not been made and none are scheduled. Our observations, including the inconsistent requirement for criminal record checks on employees in licensed facilities, indicate the need for changes.

4.21 The Department does not report on the effectiveness of the program for licensing nursing homes.

Licensing nursing homes

4.22 A license is required to operate a nursing home and it must be posted for public viewing. Operators of nursing homes must meet the requirements specified by the legislation (standards). Our first audit criterion addresses the licensing of nursing homes:

Licensing should be conditional upon compliance with the legislation and should incorporate the findings from an inspection process.

4.23 To determine whether this criterion is met, we reviewed the relevant legislation, we examined the Department's process and documentation for issuing licenses, and we talked with staff members. Our findings include the following:

- all sixty-one nursing homes are licensed to operate;
- the nursing home license, which is posted for public viewing, does not mean the nursing home is meeting the standards;
- there are inconsistencies between the legislation and licensing practices; and
- documented policies and procedures for licensing nursing homes do not exist.

All sixty-one nursing homes are licensed to operate

4.24 To ensure all sixty-one nursing homes were licensed to operate, we studied the process for issuing licenses and we examined photocopies of the signed licenses issued to the nursing homes for the fiscal year ending 31 March 2004.

4.25 We are pleased that all sixty-one nursing homes were licensed to operate. We are also pleased that the licensing process is consistent for all nursing homes. Licenses are issued annually on a timely basis and more frequently if circumstances require the issuance of a new license.

The license does not mean the nursing home is meeting the standards

4.26 Licensing is an administrative function that is separate from the inspection process. Issuing the annual licenses to the nursing homes is a routine procedure. Each March, the licenses for all of the nursing homes are prepared, signed and mailed.

4.27 We believe the intent of the legislation is that licensing be conditional upon compliance with the standards, because the Act states that a license is subject to the terms specified by the Regulation. The Act gives the Minister authority to revoke a license if the operator of a nursing home fails to meet the requirements specified by the legislation and by the Department. The Act gives the Minister authority to appoint inspectors. And, the Act gives the inspectors authority to enter and inspect to ensure compliance with the requirements.

4.28 Licensing and inspecting for compliance used to be integrated functions. Each nursing home was inspected annually and the license was issued following the inspection. During 1997, changes were made to both the licensing and inspection processes. The licensing process changed so all licenses are now issued at the same time for the same period, the fiscal year. All nursing homes are no longer inspected each year. Exhibit 4.1 shows the number of inspections performed at nursing homes in each of the past three years. It indicates that 79% of the nursing homes were inspected in 2003.

Exhibit 4.1 - Licensed nursing homes and inspections performed

	<u>2003</u>	<u>2002</u>	<u>2001</u>
Licensed nursing homes ⁽¹⁾	61	61	61
Inspections performed ⁽¹⁾	48	47	53
Percentage of licensed nursing homes inspected	79%	77%	87%
All figures are provided on a fiscal year basis.			
(1) Source: <i>Nursing Home Services - Annual Statistical Report</i>			

4.29 While we were told that new nursing homes are inspected prior to licensing, opening a new nursing home is a rare occurrence and this alone does not integrate the two functions.

4.30 We believe the licensing process is inadequate because compliance information obtained by the Department during the year is not reviewed before issuing the licenses for the next year. For example, none of the following is reviewed: inspection results, major incidents reported by the nursing homes, complaints from the public and results of the work done by the Department's internal audit group. The licensing process could easily integrate information from all of these sources through a checklist completed by support staff. If all is well, the program director signs the license with confidence. However, if a nursing home were falling short in one or more areas, it would be detected through the checklist before the nursing home is licensed for the upcoming year.

4.31 Nursing Home Services - Annual Statistical Report 2003 provides the following definition for a licensed nursing home. "A private company, usually not for profit, which meets the provincial standards of licensure to provide nursing care services in order to meet the assessed needs of the residents." We think it is inappropriate to provide this definition to the public because the Department does not verify that the nursing home "meets the provincial standards" before issuing the annual license.

4.32 Licensing should be used to enforce the legislation and ensure compliance. Inspection results should support the issuance of every license.

Recommendation

4.33 The Department should ensure nursing homes are complying with all provincial nursing home standards before issuing a license.

Departmental response

4.34 *The Department will develop a Policy and Procedures Manual to support the licensing process of nursing homes. This work will begin during the fiscal 2004/05.*

There are inconsistencies between the legislation and licensing practices

4.35 The licensing practice is not reflective of the definition in the Act for a nursing home.

4.36 Section 1 of the Act provides this definition:

"nursing home" means a residential facility operated, whether for profit or not, for the purpose of supervisory, personal or nursing care for seven or more persons who are not related by blood or marriage to the operator of the home and who by reason of age, infirmity or mental or physical disability are not fully able to care for themselves but does not include an institution operated under the Mental Health Act, the Hospital Services Act, the Hospital Act or the Family Services Act.

4.37 Using this definition, we identified facilities which should be licensed that are not. Retirement homes have become very popular with the increase in the senior population. Many retirement homes meet the definition of a nursing home stated in the legislation. By allowing facilities that meet the definition to operate without a license, the Department is not enforcing section 3(2) of the Act, which states it is illegal to operate without a license. The current practice is not consistent with legislation. The Department informed us that it does not intend to license retirement homes and that the legislation needs to be changed.

4.38 We also observed an inconsistency in the licensing of veteran nursing homes. (Nursing home services for veterans are federally funded.) There are four stand-alone nursing homes for veterans in the Province, and there are specified veteran beds in a few of the licensed nursing homes in less populated areas. Our concern involves the inconsistent licensing of the four veteran nursing homes. We were told that three of these are operated by a nearby hospital, thereby excluding them from the legislated definition of a nursing home and eliminating their need to be licensed. The fourth is operated by a non-profit organization, therefore is not excluded from the definition, and

hence is required to have a license. It does not seem reasonable that one veteran nursing home is licensed, and inspected for compliance with the provincial standards, while three others are not.

Recommendations

4.39 The Department should take immediate corrective action to comply with the legislation for licensing nursing homes which requires all facilities meeting the definition of a nursing home to be licensed. This corrective action may require changes to the practices, to the legislation or to both.

4.40 The Department should review its inconsistent practice of licensing nursing home services provided to veterans and make appropriate changes if necessary.

Departmental response

4.41 The Department will review the legislation for licensing nursing homes and will undertake discussions with the Department of Justice for this task.

Documented policies and procedures for licensing nursing homes do not exist

4.42 Policies and procedures establish rules to help ensure a program is provided according to the legislation and the program is delivered consistently. Since the legislation does not specify the duration of a license, a policy setting this fundamental requirement would be expected. Procedures for issuing a license to a nursing home would also be appropriate. There are no documented policies and procedures for licensing nursing homes.

Recommendation

4.43 The Department should develop documented policies and procedures to guide them in licensing nursing homes.

Departmental response

4.44 The Department will develop a Policy and Procedures Manual to support the licensing process of nursing homes. This work will begin during the fiscal 2004/05.

Conclusion

4.45 This criterion is not met. Licensing is not conditional upon compliance with the legislation. Issuing a license to a nursing home is an administrative task that does not incorporate inspection results or incidents reported by the nursing homes or the public. The intent of the legislation is not being applied because the license that is publicly displayed at nursing homes is not an indication that the nursing home has met the government's standards. And, there are inconsistencies between the legislation and licensing practices.

Inspections

4.46 Legislation sets out the operating requirements for nursing homes. We refer to them as “standards”. The standards relate to:

- resident services (resident care and the components of a comprehensive care plan, food service, medication management, physician services, the use of restraints, etc.);
- human resources (nursing home employees, their orientation and training);
- the environment (the safety of the building, equipment and surroundings, etc.); and
- administration (license, board of directors, policies, resident records, financial reporting, etc.).

4.47 The legislation states that a license is subject to these standards. The legislation gives the Minister authority to appoint inspectors. And, the legislation gives the inspectors authority to enter and inspect to confirm compliance with the standards. These facts serve as the basis for our second criterion:

Inspections of nursing homes should be performed to measure compliance with legislation.

4.48 In assessing the effectiveness of the Department’s inspection of nursing homes, we examined:

- the assignment of resources to inspecting (nursing home inspectors);
- the planning of inspections (how they are prioritized and scheduled);
- how inspections are done; and
- how inspection results are documented and reported.

4.49 When an inspection reveals a standard that is not met, it is labelled an “infraction”.

Nursing home inspectors - the assignment of resources to inspecting

4.50 We wanted to know if the Department had assigned resources to inspecting nursing homes, and if so, were inspections being done by qualified staff members who were trained. We are very pleased with the following findings:

- Four positions are assigned inspection responsibilities. Each of the four inspectors is aware of their responsibilities for planning, conducting and documenting inspections and was actively performing inspections at the time of our audit. In addition to

their primary role of inspecting, these staff members have other responsibilities. These include consulting and corresponding with the nursing homes and serving on committees, which address challenges or help advance the program.

- The authority to inspect nursing homes is clearly assigned to the inspectors. Each of the four inspectors has identification indicating their authority to inspect.
- Inspectors are qualified and trained for their work. Each of the four inspectors is a registered nurse. New inspectors receive on-the-job training before being given full responsibility to inspect a nursing home. At the time of our audit, all four inspectors had over two years of experience inspecting nursing homes. Two of the inspectors had worked in a nursing home and this experience helps ensure the Department's expectations and recommendations are practical.

Planning - how inspection work is prioritized and scheduled

4.51 We wanted to know if the inspection coverage and frequency are adequate and if inspection work is appropriately prioritized and scheduled. Our findings include the following:

- all nursing homes are inspected;
- the frequency of inspections is inconsistent and inadequate; and
- inspection work is not prioritized.

All nursing homes are inspected

4.52 We are pleased with the inspection coverage. Each nursing home is assigned to one of the four inspectors and all sixty-one nursing homes are inspected. We are also pleased that the inspectors have an inspection schedule to guide their work. However, there is no process in place to review and approve the annual inspection schedule.

4.53 We examined the last inspection date for each nursing home to determine the age of the inspection. We made the following observations on inspections performed as of 31 December 2003:

- all licensed nursing homes were inspected within the previous nineteen months (The nursing home having the oldest inspection was inspected again before we completed our audit.); and
- fifty-one of the sixty-one nursing homes were inspected during the calendar year 2003.

The frequency of inspections is inconsistent and inadequate

4.54 The legislation does not state a frequency for inspecting and the Department does not have a policy regarding the frequency of inspections for nursing homes.

4.55 We examined the inspection dates, for the past three inspections at each nursing home, and found the frequency of inspections was not consistent. While some nursing homes appear to be inspected annually, others are not.

4.56 We determined the amount of time between the last two inspections at each of the sixty-one nursing homes and observed the following:

- the time between the inspections ranged from nine to twenty-one months;
- two nursing homes had twenty-one months between their inspections;
- over one and one-half years passed between the last inspections at ten nursing homes; and
- only nine or ten months passed between the inspections at three nursing homes.

4.57 We believe nursing homes should be inspected at least annually. This expectation is practical given government's inspection frequency for day care facilities and restaurants. It is also reasonable given other governments' inspection frequency for nursing homes. In Nova Scotia, nursing homes must be inspected at least twice each year. In Ontario, nursing homes must be inspected at least once each year.

Inspection work is not prioritized

4.58 Inspection work is not prioritized using risk management. A risk management approach would result in more frequent and/or in-depth inspections in nursing homes assessed as having a higher risk. Our review of past inspection dates indicated the time duration between inspections was not related to the size of the nursing home or the number of infractions experienced in the past.

4.59 Size and risk are often related. We consider larger nursing homes to have a higher risk due to the number of residents involved. Thirteen of the sixty-one licensed nursing homes have one hundred or more beds. Two of these larger nursing homes were not inspected during 2003.

4.60 The following observations involve nursing homes having 100 or more beds. They are cases where we believe the time between inspections was excessive.

- Twenty-one months passed between inspections in one nursing home. An inspection in February 2002 reported four infractions. An inspection in December 2003 reported seven infractions.
- Eighteen months passed between inspections in another nursing home. An inspection in March 2002 reported two infractions. An inspection in September 2003 reported four infractions.
- Seventeen months passed between inspections in another nursing home. An inspection in June 2001 reported four infractions. An inspection in December 2002 reported five infractions. No subsequent inspection had been done as of December 2003.

4.61 Performance and risk are often directly related. We consider nursing homes that have several infractions to have a higher risk because they are not meeting the standards. Since follow-up inspections are not done, a prompt annual inspection is warranted to ensure corrective action has occurred.

4.62 The following observations involve nursing homes we feel have higher risk due to their poor compliance performance. They are examples where we believe the time between inspections was excessive.

- The inspection of one nursing home in February 2002 reported seven infractions. They involved resident medical records and incident reports, prescribed medications, basic care supplies, monitoring the temperatures of food, and employee records. The next inspection in September 2003, nineteen months later, reported five infractions.
- The inspection of another nursing home in November 2000 reported seven infractions. They involved the storage of medication and cleaning products, the use of restraints, resident care plans and records, employee records and training, and dietary standards. The next inspection in January 2002, fourteen months later, also reported seven infractions. This time they involved the storage of cleaning and care products, the use of restraints, employee records, monitoring the temperatures of food

and refrigerators, an unmet order from the Fire Marshal regarding the sprinkler system, and the frequency of their Health and Safety meetings. The next inspection in September 2003, twenty months later, reported nine infractions.

- The inspection of another nursing home in November 2001 reported eight infractions. They involved monitoring the temperature of the hot water used by residents, the storage of hazardous products and the safety manual for these products, having more than fifteen hours between supper and breakfast, the use of restraints, resident activities, and the board of directors. The next inspection in March 2003, almost sixteen months later, reported nine infractions.

4.63 Our last significant observation regarding the planning of inspections involves the timing of inspections. Inspections are not performed during the month of July or the first three weeks of August. Since this is a common vacationing time, this could be a period of higher risk for nursing homes. For example, if experienced staff members in the nursing homes are replaced with temporary workers, who may not be as familiar with the nursing home, the residents, their care and the standards, then the risk of non-compliance is greater. We believe inspections should be conducted throughout the year.

Recommendations

4.64 The Department should establish a minimum frequency for nursing home inspections.

4.65 The Department should implement a formalized risk management approach for prioritizing nursing home inspections.

4.66 The Department should ensure the annual inspection schedule is approved. The inspection schedule should ensure inspections are planned throughout the entire year, including the summer months.

Departmental responses

4.67 *The Department will develop a Policy and Procedures Manual to support the inspection process of nursing homes. This will include the frequency of inspections of nursing homes. This work will begin during the fiscal 2004/05.*

4.68 *A risk management approach for the inspection and monitoring of nursing homes will be implemented in fiscal 2004/05 and will ensure that [inspectors] have an inspection schedule to guide their work.*

4.69 *A global schedule of inspections does exist. The Director has approved the 2004/05 schedule. Inspection scheduling practices have been changed and inspections did occur this summer.*

Conducting inspections

4.70 We shadowed an inspector during the entire inspection process for one nursing home. We were present while the inspector prepared for the inspection; we accompanied the inspector during the two-day inspection; and we attended the post-inspection meeting. We also spoke with each of the other inspectors and reviewed some of their working papers and inspection reports. We found the following:

- nursing home inspections are very comprehensive;
- there are a few weaknesses in the inspection process; and
- inspections are done in a consistent manner.

Nursing home inspections are very comprehensive and measure compliance with the legislation

4.71 During the week before an inspection, the inspector prepares by reviewing information on the nursing home, preparing documentation to take and informing the nursing home of the timing of their inspection. An information package is faxed to the nursing home requesting the availability of specific information and staff members.

4.72 The actual inspection is usually a two-day process; sometimes it takes a third day. It is very thorough and includes the following activities:

- physically examining one resident of the nursing home and observing while staff provide personal care;
- inspecting areas including: resident rooms, the kitchen, dining areas, the medication room, bathing areas, laundry area, maintenance and boiler rooms, storage areas and common areas;
- interviewing some staff members (managers and directors) and talking with residents;
- reviewing records: resident records, employee files, staff training records and fire drill records;
- reviewing reports regarding paid nursing hours; temperatures of refrigerators, prepared food and hot water; maintenance work on wheel chairs and lifts; financial status of residents' clothing and comfort allowances; and

- reviewing manuals on operating policies and procedures, hazardous products and minutes from meetings.

4.73 At the end of the inspection that we observed, the inspector met with the nursing home's management to inform them of the results. In addition to discussing the infractions and suggesting improvements, the inspector reported positive findings and observations.

4.74 We studied the legislation before the inspection and from our observations we conclude that inspections do measure compliance with the legislation.

Weaknesses noted in the inspection process

4.75 There are no documented policies and procedures for the inspection process. We observed the following weaknesses resulting from the lack of appropriate policies and procedures.

4.76 Inspectors notify nursing homes a few days in advance of their inspection. Normally inspections are more effective when there is no notification. The element of surprise is important to obtaining a true representation of operations. While we understand advance notice results in the inspection being more convenient for both the nursing home and the inspector, it provides the opportunity for the nursing home to "prepare" for the inspection and it may inhibit an inspection of the true operations. Conducting surprise inspections periodically could improve day-to-day compliance with the standards, as the nursing homes would know the inspector might arrive any day.

4.77 Sample selection is often done by the nursing home, thereby reducing the value of inspection. By giving the nursing homes advance notice of inspection and the freedom to choose the files and documents that the inspector will review, it is possible for the nursing homes to select those that would not result in infractions.

4.78 For example, in the pre-inspection requirements, which are faxed to the nursing homes in advance of the inspection, the inspector may state the need to examine five personnel files for staff members, working in various areas, who were hired within the past year. When the inspector arrives, the files are ready for review. However, the nursing home is aware the standards state that a medical examination must be obtained before hiring someone. The nursing home has the opportunity to select files that meet the standard. A second example

is the selection of the resident for the inspector to examine. There is a risk that the nursing home may selectively choose a resident whose examination would result in no infractions.

4.79 In order to ensure objective observations, the inspector should select the personnel files to be reviewed, the resident to be examined, and the other documents to be examined. We believe there is a need for documented guidance on selecting sample items and determining sample size and composition.

4.80 There are increased risks of incompleteness and inconsistency when procedures are lacking. For example, the bedside audit (examining a resident) takes a significant amount of time and involves a multitude of observations, yet results in the verification of only one standard. By talking with the resident, the inspector obtains information on their needs and the care being received. By observing the nurse giving the resident their bath and helping the resident get dressed and ready for the day, the inspector obtains information on the care being provided. By later reviewing the resident's file, the inspector obtains further information on the needs of the resident and the care planned. By integrating all of these observations and using their professional judgment, the inspector is able to assess whether the care cycle is appropriate and complete and determine if the standard is met. There is no documented guidance for conducting the bedside audit.

4.81 To ensure the complete and consistent verification of the standards, we believe each standard on the inspection report should have documented requirements to guide the inspector in ensuring the standard has been satisfied. Otherwise, the Department is at risk of investing its resources in inspections that do not properly measure compliance with legislation.

Inspections are done in a consistent manner

4.82 Without documented policies and procedures guiding the inspection process, there is an increased risk of inconsistency in how inspections are performed. While we did observe some minor inconsistencies, we are pleased to report there are practices in place to enhance consistency and, overall, inspections are conducted in a consistent manner. The following findings support our conclusion.

- New inspectors receive on-the-job training that includes shadowing a co-worker and then being shadowed.

- Common forms are used by all four inspectors when preparing for, conducting and documenting inspections.
- Inspection review meetings are held regularly to discuss inspection results and enhance consistency in reporting infractions.
- Our review of the last round of inspection reports indicated there is consistency in the number of infractions reported by each of the four inspectors.

Recommendations

4.83 The Department should develop documented policies and procedures to guide the inspectors in conducting consistent inspections at nursing homes. Monitoring practices should be developed to ensure the policies and procedures are followed and updated as needed.

4.84 The Department should conduct surprise inspections periodically to reduce the risk that nursing homes will “prepare” for an inspection when advance notice is given.

4.85 The Department, not the nursing home, should select the resident to be examined, the personnel files to be reviewed, and the other documents to be examined during the inspection of a nursing home.

Departmental responses

4.86 *A number of activities currently exist to support nursing home inspection consistency. However, the Department agrees to develop a Policy and Procedures Manual to support the inspection process. This work will begin during the fiscal 2004/05.*

4.87 *The Department agrees to conduct periodic surprise inspections.*

4.88 *Currently in most situations, the [inspector] will choose the sample of files to be reviewed. In future, all samples will be chosen by the [inspector].*

Documenting and reporting inspection results

4.89 After conducting the inspection and discussing their findings at the inspection review meeting, the inspector prepares the inspection report that is signed by the program director and issued to both the nursing home’s administrator and the board of directors. The nursing home must respond in writing, reporting their corrective

measures for each infraction. While our observations include several positive findings concerning the documenting and reporting practices, we did identify areas needing improvement.

Inspections are documented consistently

4.90 We are pleased that a common inspection report is consistently used by all four inspectors and that the completed report is issued to the appropriate people. The inspection report is a comprehensive document that includes a compliance schedule and a list of required external inspections, in addition to the nursing home standards. Throughout the report, there are references to the legislation demonstrating the authority for the requirements. It uses a checklist approach, which is an efficient way to report inspection results. While the inspection report is a very long document, containing over thirty pages and over two hundred attributes for verification, it is well organized and presented. The document is both relevant and understandable.

Completeness of the inspection report

4.91 To ensure completeness of the inspection report, we traced relevant sections of the Act and the Regulation to the inspection report. We are pleased that the inspection report covers all the areas set out in the legislation.

4.92 However, due to the nature of the inspection report, we are unable to conclude if complete inspections are always done. When preparing the report, exception reporting is used and one cannot evaluate completeness when exception reporting is used.

There are a couple of areas needing improvement

4.93 The length of time passing between the inspection and the issuance of the inspection report is too long in many cases.

4.94 While there are no written policies and procedures about documenting inspections, the Department expects that the nursing home will receive their inspection report within a month. We tested a sample of twenty-four inspection reports issued over the past two years and found that inspection reports were issued from eight days to six months following the inspection. Only seven of the twenty-four inspection reports had been issued within the expected thirty days. Eleven of the twenty-four inspection reports had been issued within thirty to sixty days. For six of the twenty-four inspection reports, more than two months had passed before its issuance. This is not appropriate. The timeliness of reporting needs improving.

4.95 There are a few formatting attributes that are frustrating and time-consuming when preparing the inspection report. These inconveniences not only take a little more time when preparing the report, but they also require that the final inspection report be carefully reviewed by the inspector before it is given to the director to issue to the nursing home. We brought these matters to the attention of senior staff members of the Department.

Recommendations

4.96 The Department should ensure the timely reporting of inspection results.

4.97 The Department should review their inspection reporting process and address areas of inefficiency and inconsistency.

Departmental response

4.98 *The Department agrees to develop a Policy and Procedures Manual to support the inspection process. Reporting of inspection results and the process will be included in the manual. This work will begin during the fiscal 2004/05.*

Conclusion

4.99 This criterion is partially met. While comprehensive inspections are performed by registered nurses at all nursing homes, we found the frequency of inspections to be inconsistent and inadequate, the inspection report was not always issued promptly, and there are no documented policies and procedures for the inspection function.

Enforcement

4.100 Inspections by themselves only measure compliance with the standards. True value is obtained when deficiencies are both identified and corrected and when future deficiencies are prevented as a result of the inspection program. So, what happens when the inspection of a nursing home reveals infractions? Are infractions followed-up to ensure correction and compliance? What are the ramifications for non-compliance? While inspections measure compliance, the enforcement actions ensure compliance. Our third criterion looks at the enforcement process:

Enforcement actions should be taken when nursing homes do not comply with legislation.

4.101 The Act gives the Department authority to enforce the standards by revoking a nursing home's license and by refusing to renew a license. It also provides authority for the appointment of a trustee to replace the operator of a nursing home when a license is revoked or refused. We wanted to know what happens following an

inspection that indicates some standards are not met and if the legislated enforcement authority is exercised. Our findings include the following:

- there is a high level of non-compliance with the standards;
- repeat infractions indicate the nursing homes are not taking proper corrective action;
- the Department does have some enforcement procedures;
- enforcement actions are inadequate; and
- the Department is not using its legislated authority to enforce the standards.

There is a high level of non-compliance with the standards

4.102 The standards, which are stated in the legislation, have not changed significantly for twenty years and the same nursing homes have operated since 1986. From this perspective, this is a mature and stable program. While we were not anticipating full compliance for all nursing homes, we were expecting a very high level of compliance because of the stability of the program and the advance notice of inspection given to the nursing homes. We are disappointed in our findings.

4.103 The following observations indicate that there is a high level of non-compliance. We made these observations when reviewing summary information, provided by the Department, on the past three inspections at each of the sixty-one licensed nursing homes. We verified the accuracy of this information on a test basis. In reviewing the number of infractions reported from these 183 inspections, we found the following.

- Only two of the 183 inspections had no infractions. Two different nursing homes each had one inspection with no infractions.
- Seventy-three of the 183 inspections (40%) had five or more infractions.
- Ten of the 183 inspections had ten or more infractions. Ten different nursing homes each had one inspection with ten or more infractions. The greatest number of infractions reported was twelve.
- Only seventeen of the sixty-one nursing homes (28%) consistently had less than five infractions reported in each of their past three inspections.

- Seventeen of the sixty-one nursing homes (28%) had five or more infractions for two consecutive inspections. Six of these had five or more infractions in each of their past three inspections.

4.104 Common infractions we observed from our review of thirty-six inspection reports related to standards for:

- obtaining a medical report for potential staff members before hiring them;
- using restraints on residents;
- practicing fire drills monthly;
- monitoring the temperatures in refrigerators and of food served;
- the residents' care plans;
- the storage of cleaning products and other hazardous products; and
- the preventative maintenance program for equipment. Residents use a lot of specialized equipment. Their beds are adjustable and have side rails and locking wheels. Most residents use wheelchairs. Lifts help when moving some residents from their bed or chair and in and out of the bathtub. A preventative maintenance program is important to the safety of the residents and staff. It ensures all wheelchairs, lifts, beds, electrical appliances and other equipment are in proper condition for safe use.

Repeat infractions indicate the nursing homes are not taking proper corrective action

4.105 When there was non-compliance with the same standard for two consecutive inspections at the same nursing home, we refer to it as a "repeat infraction". A repeat infraction indicates the nursing home did not take proper corrective action when the non-compliance was detected and reported to them through the inspection process.

4.106 We tested a sample of twelve nursing homes that had five or more infractions on their last inspection report. We reviewed their past three inspection reports to identify repeat infractions in their past two inspections. We are disappointed with the following findings.

- Twenty-two of the twenty-four inspection reports had at least one repeat infraction.
- One of the largest nursing homes in the Province had six infractions in its 2003 inspection report; five of the six were repeat infractions. They involved the use of restraints, resident care plans, the preventative maintenance program for equipment,

the composition of the admission committee and providing basic care supplies.

- Another large nursing home, with over one hundred beds, had ten infractions in its 2003 inspection report; three of the ten were repeat infractions. They involved the accessibility of hazardous products, the provision of basic care supplies and charging some residents more than the approved rate.
- A medium-sized nursing home had five infractions in its 2003 inspection report; three of them were repeat infractions. They involved the preventative maintenance program and safety manuals.
- One nursing home had an infraction relating to the improper storage of cleaning products in each of three consecutive inspection reports. (The cleaning products were accessible to the residents, which could be very harmful if the product was ingested or spilled.)
- One nursing home had an infraction relating to their preventative maintenance program in each of three consecutive inspection reports prepared over four years.
- One nursing home had the same two infractions in each of three consecutive inspection reports we examined. One infraction related to the residents' care plans and the other to the composition of the board of directors.

The Department does have some enforcement procedures

4.107 While they are not documented, the Department does have some enforcement procedures that are understood by staff members. There is a process for following up on infractions found during an inspection. In addition, two form letters are used when a nursing home fails to correct the deficiency and comply within the allowed time.

4.108 Sometimes, the process works well. We tested a sample of twelve nursing homes that had several infractions. We reviewed their past three inspection reports to determine if the nursing home had properly corrected their infractions and if the corrections were made promptly within the assigned period. Our testing indicated that seventeen of the thirty-six inspection files (47%) had documentation showing the nursing home had taken proper corrective actions to

address their infractions. Fourteen of these had documentation indicating the nursing home had taken corrective actions within the time allowed.

Enforcement actions are inadequate

4.109 While our findings indicate enforcement actions are sometimes successful, our comments above on the high level of non-compliance with the standards and the occurrences of repeat infractions are indicators that enforcement actions are inadequate. The following findings indicate that infractions are not always corrected and not corrected by the assigned time.

- Nineteen of the thirty-six inspection files tested (53%) did not have documentation showing the nursing home had taken proper corrective actions to address all of their infractions.
- Twenty-two of the thirty-six inspection files tested (61%) did not have documentation showing the nursing home had properly corrected their infractions within the time permitted.

4.110 The responsibility for enforcement rests primarily with the inspectors. Once the inspectors have issued inspection reports showing infractions, it is their job to follow-up with the nursing home. However, without documented policies and procedures stating the Department's position regarding non-compliance to support their enforcement efforts, it is very difficult to obtain compliance from a nursing home that chooses not to comply. Current enforcement efforts are limited to letters to the nursing home to remind it of the non-compliance and to request immediate attention. These enforcement procedures stop at the director's level and there are no enforcement procedures involving the Minister of the Department.

The Department is not using its legislated authority to enforce the standards

4.111 Standards are established to ensure a level of safety and care. The Act gives the Department the responsibility and the authority to enforce the standards. Significant enforcement actions might include: revoking a license, not renewing a license, issuing a temporary license and publicly reporting nursing homes who fail to comply. None of these are being used, and none have been used for at least the past four years. There are no ramifications for non-compliance.

4.112 The Department does not have an enforcement policy, or documented procedures regarding enforcement. Typically, an enforcement policy describes the sanctions exercised to bring about compliance with the standards and states the ramifications of not

complying. Documented enforcement procedures usually specify the roles and responsibilities of the individuals involved, along with the timing of actions.

Recommendations

4.113 To protect the health and safety of nursing home residents better, the Department should establish an enforcement policy that ensures licensed nursing homes meet the standards.

4.114 The Department should develop and document procedures for enforcing the standards. Using temporary licenses and publicly reporting inspection results should be considered as enforcement actions.

4.115 The Department should monitor its enforcement actions to ensure all licensed nursing homes comply with the provincial standards for safe and proper care.

Departmental response

4.116 *The Department agrees with these recommendations and will address them through a Nursing Home Policy and Procedures Manual for the Enforcement of Standards. This work will begin during the fiscal 2004/05.*

Conclusion

4.117 This criterion is partially met. Follow-up on inspection results is done and sometimes results in the timely correction of infractions. However, the Department is not using its legislated authority to enforce the standards. As a result, there is a high level of non-compliance with the standards and it is rare that an inspector finds a nursing home complying with all of the standards.

Policies and procedures

4.118 Policies and procedures document the rules of a program and describe the proper steps in performing tasks. Not only do policies and procedures inform staff members how to fulfill their day-to-day responsibilities successfully, but they also provide a basis for monitoring activities to ensure consistency in operations. Our fourth criterion involves policies and procedures:

Policies and procedures for licensing and inspecting nursing homes and enforcing the legislation should be documented and followed.

4.119 Our findings include the following:

- the Department does not have documented policies and procedures for licensing and inspecting nursing homes and enforcing the legislation;
- we identified two additional areas where policies and procedures are needed; and
- the monitoring within the program needs improving.

No documented policies and procedures

4.120 The Department does not have a policies and procedures manual for the program to guide central office operations, such as licensing and inspecting nursing homes and enforcing the legislation. Several of our observations demonstrating the need for policies and procedures regarding the Department's legislated responsibilities are reported under our first three criteria. Some of the results of not having policies and procedures that we identified include the following:

- licensing is not being used to its potential to enforce the legislation and ensure compliance;
- the frequency of inspections is inconsistent and inadequate;
- there is inconsistency in the timely reporting of inspection results; and
- there is a high level of non-compliance with the standards, and repeat infractions indicate the nursing homes are not taking proper corrective action.

4.121 We have made recommendations to address these deficiencies.

Two additional areas where policies and procedures are needed

4.122 We believe the Department also needs policies and procedures for addressing complaints reported by the public and major incidents (such as infectious outbreaks or events involving the police, coroner or fire department) reported by the nursing homes. Given the Department's limited presence in the nursing homes, complaints and incidents reported to the Department could be key indicators of problems or risks requiring attention.

4.123 There is no formal process for addressing complaints received from the public to ensure they are handled promptly, properly and consistently. And, complaints are not monitored to identify trends with specific nursing homes or with specific standards. While our work in this area was limited, the Department told us that they respond to all legitimate complaints and they are developing a formalized method of processing complaints.

4.124 Section 19 of the Act states, “*The operator of a nursing home shall notify the Director as soon as possible of any major incident or accident that affects or may affect the health and safety of the residents or staff.*” While the Department does have a Directive to the nursing homes regarding reporting major incidents, it does not have documented procedures for their own work regarding major incidents.

4.125 Through our interviews with staff members and our review of some reports, we can conclude the Department has a process for receiving major incident reports from the nursing homes, following-up on the incident with the nursing home and documenting the incident. However, we observed the following weaknesses in the Department’s processing of major incident reports:

- major incident reports are not logged in a master list when received to ensure proper attention;
- while there is a form for documenting major incidents reported by the nursing homes, it is not consistently used by all inspectors;
- the Department does not monitor major incidents reported by the nursing homes to identify trends; and
- major incident reports are not reviewed as part of the annual licensing process.

4.126 The legislation requires that all major incidents be reported to central office, but does not define a “major incident”. A policy defining a major incident would be appropriate. In addition, procedures regarding how central office is to address, document and monitor major incidents would be appropriate.

Recommendations

4.127 **The Department should develop documented policies and procedures to ensure complaints received from the public are investigated promptly, documented consistently, monitored to identify trends and considered during the licensing process. The Department should monitor compliance with the documented procedures to ensure the proper processing of complaints received from the public.**

4.128 **The Department should define “major incidents” and develop documented policies and procedures to ensure incidents reported by the nursing homes are addressed promptly, documented consistently, monitored to identify trends and considered during the licensing process. The Department should monitor compliance with the documented procedures to ensure**

the proper processing of major incidents reported by the nursing homes.

Departmental responses

4.129 *The Department agrees to develop a documented process for dealing with complaints from the public. Work is already in progress on this area and it will include a monitoring mechanism.*

4.130 *A policy does exist for “major incidents”. The policy was reviewed in the summer of 2004. The Department agrees to further monitor major incidents that are reported by nursing homes.*

Monitoring within the program needs improving

4.131 Monitoring responsibilities for the program are assigned to the director and some good procedures are in place. They include: regularly held staff and inspection review meetings; reviewing the circulation file containing all correspondence for the program leaving the Department; and director access to the inspectors’ daily schedules. In addition, once or twice during each of the past four years, the infractions were reviewed and a memo was issued to all nursing homes informing them of a few problem areas and offering helpful information. Some monitoring is also done through the production of the Department’s annual statistical report.

4.132 However, some monitoring procedures that we would expect are not done. Examples of appropriate monitoring tasks, that are not done, include the following:

- the inspection report should be reviewed to determine the nursing home’s compliance with the standards before the license is issued;
- the inspection schedule should be approved and monitored to ensure complete coverage and appropriate frequency of inspection;
- inspection files, containing inspection reports and follow-up, should be reviewed periodically to ensure proper enforcement, consistency of the work done by the four inspectors and an overall quality in work performance; and
- non-compliance with the standards, major incidents reported by the nursing homes, and complaints received from the public, should be monitored and summarized to identify trends so timely corrective actions can be taken where appropriate (monitoring major incidents and complaints provides the opportunity to correlate these incidents with infractions noted during the inspections).

4.133 With the absence of policies and procedures that serve as a basis for monitoring, an adequate monitoring system has not been established. Without adequate monitoring of the program, problems may not be identified (and hence not corrected) in a timely fashion.

Recommendation

4.134 **The Department should develop sufficient appropriate monitoring procedures for the nursing home services program.**

Departmental response

4.135 *Monitoring does currently exist within the Nursing Home Services Program. These activities will be reviewed and enhanced where necessary.*

Conclusion

4.136 This criterion is not met. The Department does not have documented policies and procedures for licensing and inspecting nursing homes and enforcing the legislation.

Reviewing and amending legislation, policies and procedures

4.137 Since the establishment of the legislation in the early 1980s, the role and clientele of nursing homes have changed. In the mid 1990s, the change in the eligibility criteria for entering a nursing home led to the population becoming, on average, more frail. Nursing homes have changed from being “retirement homes” to being “extensions of hospitals”. Since nursing homes now have a different role serving a different clientele, we wanted to ensure that the program documentation had been reviewed and revised in response to these and other changes.

4.138 Our criteria were:

Regular reviews of the legislation, policies and procedures for Nursing Home Services should be conducted; and necessary changes to the legislation, policies and procedures for Nursing Home Services should be made in a timely manner.

4.139 As reported earlier, our findings indicate that there are no documented policies and procedures for the program. Therefore, in determining whether these criteria are met, we reviewed other information such as the inspection report used by the Department and the directives manual prepared for the nursing homes, in addition to the legislation.

4.140 In determining whether reviews and amendments are done to the legislation, inspection report and directives manual, we examined the current documents and older versions where possible. The

Department provided us with information on changes made to these documents within the past ten years. We talked with staff members. And, we reviewed working papers regarding reviews. Our findings include the following:

- the responsibility for reviewing the program's documentation is clearly assigned and it is reviewed;
- the legislation is in need of amendment; and
- the directives manual needs a thorough review and revision. The Department is currently working on this.

***The program's
documentation is being
reviewed***

4.141 While there is no policy for reviewing and amending the legislation and other documentation for the program, we are pleased the responsibility for reviewing the information is clearly assigned to one of the inspectors and it is being reviewed.

4.142 In conducting the review, the Department established a committee and obtained comments from the nursing homes and from coworkers within Nursing Home Services. Information on nursing home operations in other provinces was also considered. We are pleased that each of the documents we considered significant to the program was reviewed. The inspection report was reviewed and resulted in a revised inspection report dated March 2001. The legislation was reviewed during 2001 and 2002 and the need for revisions was determined. And, the directives manual is currently under review.

***The legislation needs
amendment***

4.143 A few administrative amendments were made; however, there have been no major amendments to the legislation since its creation in 1982-85. We identified the following two significant inconsistencies, which clearly indicate the legislation needs amendment.

4.144 Employees of nursing homes are not required to have criminal record checks. Employees of other regulated facilities licensed by the Department (such as day care facilities, special care homes and community residences) are required by legislation to have criminal record checks. In our opinion, the Department is not providing adequate protection by not requiring the criminal record check on employees in nursing homes.

4.145 The Department has a policy regarding criminal record checks. It is dated February 2002 and states, "This policy has been developed to ensure that programs and services funded and/or

approved by F.C.S. establish and maintain practices which protect children and vulnerable adults from being ... abused.” The policy states where it applies and where it does not. There is no mention of nursing homes. Based on the purpose of the policy as stated in the preamble, it would be appropriate for nursing homes to be included.

4.146 The second inconsistency involves the definition of a “nursing home”. As reported earlier under our first criterion, our findings under licensing indicate inconsistencies between current practice and legislation, thereby demonstrating the need for review.

4.147 Departmental correspondence, dated April 1999, listed nine proposed changes to the Regulation. The suggestions included: language and terminology needing to be updated, terms requiring definition (such as “incident”) and topics needing to be addressed (such as notifiable disease and oxygen). Again in 2002, the Department determined the need to revise the legislation. Additional areas for change included: licensing, care plans, sections that could be deleted and more terms needing definitions. No amendments have been made and we were told that none are likely in the near future.

The directives manual needs a thorough review

4.148 The Directives Manual for Nursing Homes was created along with the legislation in the early 1980s. This massive accumulation of guidelines, policies, program information, procedures, protocols, forms, reports and sample contracts is provided to all nursing homes.

4.149 Our observations regarding the directives manual clearly indicate the need for its revision. The volume of information, the manner in which it is organized and inconsistencies in terms impair the usefulness of the information presented in the manual.

4.150 The last major review and revision of the manual occurred in 1995. The Department recognizes the need for another major revision, and has been working on revising the manual since early 2002, a period of over two years. The Department told us that they expect a fully revised manual to be ready for circulation in the summer of 2004. The usefulness of the manual will be enhanced if reviews and revisions are done regularly to ensure the information presented in the manual is relevant.

Recommendations

4.151 The Department should review the legislation for nursing homes and initiate amendments as appropriate.

4.152 The Department should expand the application of its policy regarding criminal record checks to include the employees of nursing homes.

4.153 The Department should complete the revision of the directives manual.

4.154 The Department should develop policies and procedures for reviewing and amending the legislation, policies and procedures for Nursing Home Services.

Departmental responses

4.155 *A preliminary review of the Nursing Homes Act and Regulations has been carried out within the Department. The Department will undertake discussions with the Department of Justice for this task.*

4.156 *... a policy regarding criminal record checks will be developed and implemented.*

4.157 *The Department has completed the revision of the Directives Manual and new copies will be provided to the nursing home sector in September. Officials of Nursing Home Services will respond to questions from the nursing home sector at their Administrators meeting which will be held in mid September 2004.*

4.158 *The Department agrees to develop Policies and Procedures for reviewing and amending the legislation, policies and procedures for Nursing Home Services.*

Conclusion

4.159 Our first criterion in this section is met. The responsibility for reviewing the legislation and other documentation for the program is clearly assigned and it has been reviewed. The legislation was reviewed during 2001 and 2002 and the need for revisions was determined. The inspection report was reviewed, resulting in a revised report dated March 2001. The directives manual is currently under review.

4.160 Our second criterion is partially met. Necessary changes to the program's documentation are not always done in a timely manner. While amendments were made to the inspection report, no significant changes have been made to the legislation since its creation in the early 1980s. The directives manual has been under review for over two years and the review is not complete.

Accountability

4.161 Reporting on the effectiveness of the program for licensing nursing homes is a component of being accountable. Section 13(2) of the *Auditor General Act* mandates our Office to report cases in which we have observed that satisfactory procedures have not been established to measure and report on the effectiveness of programs. This serves as the basis for our final criterion:

The Department should report on the effectiveness of the program for licensing nursing homes.

4.162 Appropriate reporting procedures provide information for determining whether a program is meeting its objectives. Objectives, goals and performance indicators with monitoring procedures are important for any program. To determine whether this criterion is met, we gathered information to address the following questions:

- are there performance indicators with monitoring procedures for the program? and
- does the Department have relevant and accurate reporting on the effectiveness of the program?

Are there performance indicators with monitoring procedures for the program?

4.163 The Department informed us that they do not have goals or performance indicators with monitoring procedures for the program for licensing and inspecting nursing homes. While the Department is properly documenting inspections, they are not monitoring and reporting compliance performance.

Does the Department have relevant and accurate reporting on the effectiveness of the program?

4.164 The Department does not have relevant and accurate reporting on the effectiveness of the program for licensing nursing homes.

4.165 The only external reporting relating to inspections is very limited. The Department's annual statistical report states the number of inspections performed and the number of homes with infractions. There is no inspection information in the Department's annual report.

4.166 While a thorough report on statistics is published, we are disappointed that the Department has not developed any goals or performance indicators to link the statistical information to the measurement of program effectiveness.

Recommendations

4.167 **To measure the effectiveness of the nursing home services program, the Department should establish program goals,**

performance indicators and monitoring procedures for evaluating performance.

4.168 To provide better accountability to the public, the Department should report publicly on the performance of the nursing home services program.

Departmental responses

4.169 *The Department agrees to begin to establish program goals, performance indicators and monitoring procedures for evaluating performance.*

4.170 *The Department agrees to report internally and publicly on the performance of the Nursing Home Services Program.*

Conclusion

4.171 This criterion is not met. The Department does not report on the effectiveness of the program for licensing nursing homes.

Overall conclusion

4.172 Standards are established to ensure a level of safety and quality. When the public sees a license issued by the government in a nursing home, there is an assumption the government has verified that the nursing home is following the rules and it is a safe place for their loved ones to live. Our observations indicate this may not always be true.

4.173 We make several recommendations that we think will help the Department ensure that the legislation is followed and proper nursing home services are provided. We encourage the Department to be proactive with our recommendations and apply them in other programs where standards have been established.

4.174 We believe the implementation of many of our recommendations will help the Department achieve some of their goals as outlined in their Strategic Plan for the period 2003-04 to 2005-06. Our recommendation regarding criminal record checks for employees in nursing homes complements the Department's goals regarding "protection for those who need it". It also would serve the Department's goal for "consistent policies and procedures". Our recommendations under the last criterion should contribute towards the Department's goal to be "accountable". Moreover, many, if not all of our recommendations should contribute towards the Department's goal "to improve the quality and sustainability of the Nursing Home System."

4.175 We conclude that the Department of Family and Community Services does not have appropriate practices to ensure that licensed nursing homes are complying with the Province's legislation for nursing homes. While the Department does license nursing homes, inspection results are not reviewed to ensure that the nursing home is complying with the standards before the license is issued. While the Department does comprehensive inspections at nursing homes, full value is not received from this work because enforcement actions are inadequate and deficiencies are not always corrected.

4.176 We conclude that the Province's legislation for nursing homes is in need of review and amendment and that the Department of Family and Community Services does not have appropriate practices to ensure the Province's legislation and the departmental policies for nursing homes are reviewed and amended on a regular basis.