

This Inspection Guide provides *guidance* to the inspector during the initial planning of an inspection. Not all sections will be applicable in every situation and the inspector may need to adjust the inspection based on information collected.

PROFILE FOR RESIDENT

- Name, room number, home area
- Date of birth, date of admission, date of discharge (if applicable)
- Diagnoses
- Other resident information, as applicable: Physician, SDM, Advanced Directives, Activities of Daily Living, and RAI-MDS Outcome Scores, e.g., CPS

CLINICAL RECORD REVIEW (ELECTRONIC AND HARD COPY)

ASSESSMENTS

- RAI-MDS - Section B (Cognitive Patterns), Section C (Communication/Hearing patterns), Section D (Vision Patterns), Section E (Mood and Behaviour Patterns), Section F (Psychosocial Well-being), Section G (Physical Functioning and Structural Problems), Section N (Activity Pursuit Patterns), Section P (Special Treatments and Procedures), and Section R (Assessment Information).
- Routines and preferences of resident considered in the assessment.
- Spiritual/religious and leisure activities considered in the assessment.

PLAN OF CARE

- Care plan is based on resident’s daily care needs.
- Review of psychosocial wellbeing in the plan of care, e.g., Chaplain/spiritual leader’s involvement, recreation, and leisure focus.

PROGRESS NOTES

- Notes related to resident’s preferences and choices.

OBSERVATIONS

- Staff providing care with respect, dignity, and maintaining resident’s privacy.
- Residents encouraged to make individual choices.

- Interventions are implemented consistent with resident needs and condition.
- Resident protected from abuse and neglected.
- Resident's individuality and preferences is respected.

INTERVIEWS

RESIDENT/SDM

- Discuss if staff provide individual care that promotes dignity and choice.
- Discuss if staff are providing care following the plan of care.
- Discuss if staff are providing timely and appropriate assistance.
- Discuss if bedtime and rest routines are considered and respected by staff.
- Discuss if the resident was offered to be a part of the Resident Council.
- Note if resident has concerns related to their rights, dignity, and choice.

DIRECT CARE STAFF

PSWs and others as applicable

- Discuss specific concerns or inspection item.
- Discuss if staff is aware of residents' plan of care.
- Staff awareness of the resident's preferences and needs.
- Discuss how staff address concerns from the residents, if identified.
- Discuss training the staff received for residents' rights and choice.

REGISTERED STAFF AND MEDICAL PERSONNEL

Including Recreation Staff

- Staff collaboration for residents' several aspects of care.
- Interdisciplinary assessment reflective of cultural, spiritual, religious practices, sleep and age-related preferences.
- Discuss strategies developed for communication for residents with impaired cognition or language limitation.

MANAGEMENT

Director of Care, Administrator/Delegate

- Confirm that the residents' Bill of Rights has been promoted and respected.
- Discuss specific concern or inspection item.
- Discuss that the staff are provided with adequate training for resident's right and resident care.
- Discuss legislative concerns, if identified

OTHER RECORD REVIEW

- Related policies and procedures.
- Orientation, training and re-training.
- Experience survey.
- Additional audio/video records related to the concern.

FOR FURTHER GUIDANCE

Please refer to policies, guidance documents, and job aids available in the eInspectors' Handbook.