

**A
Residential
Care
Facilities
Licensing
Newsletter**



VULNERABLE PATIENTS TO GET PROTECTION



An amendment introduced on April 21, 2010, to the *Hospital Act*, as a part of a miscellaneous statutes bill by the provincial Attorney General, will increase protection against potential financial abuse to patients in private hospitals and extended-care facilities. The provision will prohibit any gift or provision in a patient's will for an employee that was made due to persuasion or inducement, unless the Public Guardian and Trustee gives consent. The amendment also means that staff members cannot act under a representation agreement or power of attorney for a patient – unless the employee is a child, parent or spouse. Currently, these measures are included in Section 18 of the *Community Care and Assisted Living Act*. The legislative amendment will formally add a similar provision to the *Hospital Act* for employees of private hospitals and extended-care facilities. In order to avoid conflicts of interest, many health-authority and private facilities already have policies in place regarding staff accepting gifts.

(Information Bulletin from the Ministry of Health Services)

Some Medication-Related Questions and Answers

1. Some facilities are now using the new “pac med” system rather than traditional blister packaging. Do the cellophane pouches have to include a medication expiry date on the label? If the pouch does not include a medication expiry date, would this be a contravention to HPA Bylaws Schedule F Part 3 - RESIDENTIAL CARE FACILITIES AND HOMES STANDARDS OF PRACTICE?

No, medication expiry dates do not have to be printed on the pouches according to the revised version of the **HPA Bylaws Schedule F Part 3 - RESIDENTIAL CARE FACILITIES AND HOMES STANDARDS OF PRACTICE** released on April 1, 2009, which applies to pharmacists providing pharmacy services to facilities and homes licensed under the *Community Care and Assisted Living Act*. (Note: BC College of Pharmacists Bylaw 7 has been replaced by HPA Bylaws Schedule F Part 3 - RESIDENTIAL CARE FACILITIES AND HOMES STANDARDS OF PRACTICE.)

To download a copy:

http://www.bcpharmacists.org/library/D-Legislation_Standards/D-2_Provincial_Legislation/5080_HPA_Bylaws_Residential_Care.pdf

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The Director of Licensing released the following Standards of Practice in October 2009:

- Immunization of Adult Persons in Residential Care, and
- Agreement in Writing to the Use of Restraints.

A copy of each of these Director of Licensing Standards of Practice has been included as an insert in this newsletter and are posted on our website: http://www.viha.ca/mho/licensing/residential_facilities.htm



For more
Residential Care Licensing
information visit our website:
www.viha.ca/mho/licensing

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Produced by Vancouver Island Health Authority - Child & Adult Residential Care Licensing

2. When a PRN is given, shouldn't facility staff be signing on the back of the same Medication Administration Record (MAR) where the medication is written? I have seen facility staff record on the back of page 1 of the MAR, even though page 2 of the MAR actually has the PRN medication listing (i.e. they are not recording on the back of page 2, even though this is where the medication is listed). Managers have stated that they have always done it this way because it is easier to keep a running record. Is this an appropriate practice?

When a PRN is given, this should be charted on the back of the MARs under the "PRN area". The important point is to make sure there is a system of accountability for PRN's given - what was given, by whom, frequency, etc.

3. In regards to standing orders, I have seen that all the persons in care have a doctor's order for standing order medications, such as decongestants, pain relievers, etc., but there is one "communal" bottle for all of them. Does each person in care require their own separate bottle/package of standing order medication?

Keeping communal bottles/packages of medications for patients is not an acceptable practice. Standing order medications should be packaged in small sizes (liquids) or blistered as individual tablets/capsules and labeled with the name and other information pertaining to the individual person in care.

Everyone Can Eat More Vegetables and Fruit



Eating more vegetables and fruit is a great way to have a more healthy diet. What's so great about vegetables and fruit?

Well, they are:

- Low in fat and calories (with the exception of avocados and coconuts);
- High in vitamins and fibre; and
- Contain compounds called phytochemicals which help prevent cancer, heart disease and stroke.

Adults should eat at least seven servings of vegetables and fruit per day. Here are some easy ways to get more vegetables and fruits into your diet:

- Serve cold breakfast cereal with sliced bananas, peaches or berries.
- Add raisins, prunes, dried apricots or other fruit to cooked cereal.
- Mix berries or other fruit into pancake batter.
- Use applesauce or canned fruit instead of syrup on pancakes, waffles or French toast;
- Make a yogurt sundae by layering fruit, cereal and yogurt in a tall glass.
- Cut up an apple or pear into quarters or eighths. Spread one side with peanut, almond, or other nut butter. Put two slices together like a sandwich.
- Sliced fruits and berries are also good for dipping. Try bananas, apples, blueberries, strawberries, or melon chunks. Low fat vanilla yogurt makes a good dip.
- Make a fruit smoothie using milk, soy milk or yogurt together with fresh, frozen or canned fruit. Add a drop of vanilla and sweeten with a little honey if desired.
- Besides adding lettuce, tomatoes and cucumber to sandwiches, try these: roasted or raw bell peppers, avocado, sprouts, shredded cabbage or carrots, or slices of apple or pear.
- Serve salad daily at lunch, dinner or snack time. Use of variety of greens such as romaine, spinach. Add colorful fresh fruits and vegetables such as apples, grapes, melons, berries, carrots, tomatoes, peppers, dried fruit, nuts and seeds. Or try adding grated or cubed cheese.
- Vegetables and dip make a good snack. Try carrots, broccoli, cauliflower, mushrooms, pepper strips and rutabaga. Make the dip using low fat yogurt or salad dressing.
- Provide soup made with lots of vegetables. If serving canned soup, add fresh, frozen or left over vegetables. These can be chopped, grated, or blended with the soup using a food processor.

- When serving pizza, add extra vegetables such as tomato slices, peppers, onion, zucchini, summer squash, broccoli, cauliflower, chopped spinach, or pineapple.
- Add additional vegetables when making stew, chili, lasagna, casseroles, or pasta.
- Add zest to vegetables by adding herbs, grated cheese, slivered almonds, balsamic vinegar, a little butter, or cheese sauce. Or stir fry a combination of vegetables.
- For dessert, try fruit or berries served with vanilla yogurt and sprinkled with cinnamon. Offer fruit crisp, fruit cobbler, or top cakes, puddings or ice cream with a variety of fruits.

Adapted from ActNowBC --“Everyone can eat more fruits and vegetables”

My workplace changed its menu to include all pureed meals to be the same as the regular menu. Since moving to this menu, the residents are eating more and enjoying the great variety of pleasant looking, nutritious, tasty foods.

My first try at enhancing a fun meal was a hot dog (see the photo on the right)...the bottom is pureed bread, on the bread is a pureed hot dog, on one side there is ketchup and the opposite side, pureed relish and on the top is mustard. The pureed meat is served hot, just like a regular hot dog.

I wondered how it would be accepted, and to my joy, the residents were pleased and several families offered their thanks. In my opinion, one can pretty well puree up anything, e.g. we serve pureed entrees complemented with pureed condiments.

Submitted by: Lora Sinclair, Food Service Supervisor/CSNM



You were Asking...

Do we have to have all of our facility staff certified in First Aid? What do we need to have for first aid supplies? Where should we keep them? How many kits do we need to have?

First Aid requirements for employees can be found under Section 43 of the Residential Care Regulation (RCR). Section 43(1) specifies that “a Licensee must ensure that persons in care have at all times immediate access to an employee who

(a) holds a valid first aid and CPR certificate, provided on completion of a course that meets the requirements of Schedule C,

(b) is knowledgeable respecting each person in care’s medical condition, if any, and

(c) is capable of effectively communicating with emergency personnel.”

This area of the legislation has not changed significantly from the old Adult Care Regulations (ACR). While the legislation only requires the licensee to ensure that residents have access to one employee with first aid and CPR at all times, functionally, many facilities have found that in order to meet this requirement, they may have to have several, if not all, of their employees certified in first aid and CPR. During inspections, Licensing staff will be assessing that facilities are meeting the minimum requirements as set out in the legislation. How Licensees ensure that they are in compliance with this requirement is up to them.

The biggest change between the new RCR and the old ACR in relation to employee first aid requirements is that the Director of Licensing Standard of Practice for First Aid Courses, which provided a list of approved first aid courses, was replaced by the requirements that must be covered in first aid courses taken by employees. These requirements are set out in Schedule C of the RCR.

Section 43(2) sets out requirements for first aid supplies. There are no prescriptive requirements of what first aid supplies should be kept or how many first aid kits a facility needs, but this section does specify that supplies must be “readily accessible”. Readily accessible first aid supplies means that there should be no delay in accessing the supplies when they are needed. Delays in accessing supplies might occur if the supplies are dispersed in various locations in the facility, or in a room, or that they may be kept in an area that is locked (e.g. cupboard, drawer, room). Therefore, in order to ensure that first aid supplies are readily accessible, they should be kept in some sort of kit or cart that can easily found and moved by any staff person to the injured person. If your facility is large with residents being cared for over a number of floors or wings, you should have a sufficient number of first aid kits to ensure that a kit is readily accessible to each floor or wing. For some facilities this may mean that a kit is necessary for each floor or wing of the building(s), for others, they may only need a first aid kit for every couple of floors or wings. The number of kits that you have will be determined by the unique characteristics of your facility, which may include the physical layout, your staffing levels, and so on.

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If staff take residents off-site in a van or bus, they should also have a first aid kit with them. For a list of suggested first aid supplies for your facility's first aid kit(s), refer to the Infosheet – "Suggested First Aid Supplies for Residential Care Facilities" available from our website: http://www.viha.ca/mho/licensing/residential_facilities.htm

Finding a Care Facility – Community Care Licensing Branch

The Ministry of Healthy Living and Sport recently conducted a voluntary survey of seniors care facilities licensed under the Community Care and Assisted Living Act (CCALA). The objective of the survey was to profile facilities based on practices that have been identified as important to persons in care and their families. The survey asked questions about several elements of service provision, including how care facilities share information with residents and their families, programs and amenities available for residents, and facility quality improvement practices. This initiative will bring more information to the public about residential care.

As a result of being in touch with each of the licensed care facilities, the Community Care Licensing Branch was able to create facility locator links that allow the public to find a licensed seniors care facility through their website. Anyone may search for care facilities by health authority or community.

To find a care facility by **Community**:

<http://www.hls.gov.bc.ca/ccf/survey/index.php/displaycommunity/index>

To find a care facility by **Health Authority**:

<http://www.hls.gov.bc.ca/ccf/survey/index.php/displayhealthauthority/index>

EMERGENCY PREPAREDNESS INFORMATION SESSION CD

VIHA Community Care Facilities Licensing Program in partnership with VIHA Emergency Management, has held *Emergency Preparedness Information Sessions for Licensed Residential Care Providers*. The enclosed CD is from this session and includes the following information: "Introduction to the RCF Plan", and other resources. These resources will provide you with an overview of the components of a comprehensive emergency plan and the resources that will help you tailor an all-inclusive emergency plan specific to your residential care facility. An invitation was mailed to every licensed residential care provider on Vancouver Island to register for one of the information sessions held in Victoria, Nanaimo and Campbell River in June 2010. Contact your Licensing office for more information.

For VIHA Region-wide Updates:

South Island – Gateway Village

#201-771 Vernon Ave, Victoria, BC V8X 5A7,

New effective July 21, 2010: PH: 250-519-3401, FAX: 250-519-3402

Training:

Orientation to Licensing for New and Pending Managers of Residential Care Facilities

Dates: Call for information on dates for fall 2010 and spring 2011.

Space is limited to 15 participants.

[What's New in Nutrition: Considerations for Menu Planning](#)

Dates: Call for information on dates for fall 2010 and spring 2011.

Call 250-519-3401 for more information on or to register for these sessions.

Central Island

#29 - 1925 Bowen Road, Nanaimo BC, V9S 1H1, PH: 250-739-5800, FAX: 250-751-1118

Training:

Call 250-739-5800 for more information on upcoming Manager Orientation sessions and What's New in Nutrition: Considerations for Menu Planning sessions or to register.

North Island

#200-1100 Island Highway, Campbell River, BC V9W 8C6, PH: 250-850-2110, FAX: 250-286-3486