
Licensing Inspection Report (Semi-Annual Inspection)

Facility: VALLEY VIEW VILLA
Address: 6125 STELLARTON TRAFALGAR RD.
RIVERTON NS, B0K 1S0
Date(s) of Inspection: September 6, 2019

Requirements resulting from licensing inspection:

1. LTCPR 7.1.10.c
The licensee shall ensure on admission, residents and/or authorized designates are provided with a list of the home's policies, relevant to residents and families, and copies are provided upon request.

Outstanding requirements from previous inspection(s):

1. Date of inspection: April 11 and 12, 2019 LTCPR 10.2.3
The licensee shall ensure resident records are protected from unauthorized collection, use, disclosure, copying and modification.
2. Date of inspection: April 11 and 12, 2019 LTCPR 7.2.4
The licensee shall ensure the administrator attends resident council meetings a minimum of quarterly.
3. Date of inspection: April 11 and 12, 2019 LTCPR 8.3.6
The licensee shall ensure all persons who are employed by the licensee, or who are providing services on behalf of the licensee, are provided with education regarding the licensee's policies and procedures related to abuse and the PPCA.
4. Date of inspection: April 11 and 12, 2019 LTCPR 6.3.4.a
The licensee shall ensure each resident has a plan of care which includes the plan's rationale, measurable and achievable goals, benefits, expected outcomes, detailed actions that the interdisciplinary team shall undertake to meet the resident's identified needs and time frames for evaluation.

- 5.** Date of inspection: April 11 and 12, 2019 HSCR 19(1)(d), LTCPR 11.1.6
The licensee shall ensure the home provides a documented, timely orientation for all staff members, volunteers and contracted personnel. The orientation provides the necessary information to support residents in a safe manner and improve their quality of life.
- 6.** Date of inspection: April 11 and 12, 2019 HSCR 27(10)(a), LTCPR 9.2.8
The licensee shall ensure upon initial employment in a home and a minimum of annually thereafter, every staff member is instructed in and understands the contents of the All Hazards Plan, the Fire Safety Plan, the Business Continuity Plan and the Staff Call Back System Plan as applicable to their individual roles. The administrator of a home for special care is responsible for training staff and residents on emergency plan procedures and conducting emergency drills with staff and residents.
- 7.** Date of inspection: April 11 and 12, 2019 LTCPR 9.2.4.a
The licensee shall ensure there is a documented Fire Safety Plan, in accordance with the National Fire Code, that is reviewed a minimum of annually and revised as necessary to ensure the plan is current.
- 8.** Date of inspection: April 11 and 12, 2019 LTCPR 8.4.9.d
The licensee shall ensure the home implements a hand hygiene program which includes the following: evaluating staff adherence with hand hygiene practices through auditing and observation.
- 9.** Date of inspection: April 11 and 12, 2019 LTCPR 12.2.2.2.c
The licensee shall ensure aesthetic, functional and surface integrity of the following are maintained: interior building components such as, but not limited to, partitions, ceilings, doors, casework, coatings and sealants.
- 10.** Date of inspection: April 11 and 12, 2019 LTCPR 9.2.2 a
The licensee shall ensure there is a documented Business Continuity Plan that addresses the operational recovery and continuity of services in the face of a disaster, labour disruption or other major outage. The Business Continuity Plan includes the following: hazard, vulnerability and risk assessment, mission critical activities, recovery strategies, loss of electrical power, water, heat, ventilation and waste water services, loss of information technology (computer / telephone / fax) priorities, geographic footprint and pandemic situation (pandemic planning is undertaken and completed in accordance with direction received from the Department of Health and Wellness.)

- 11.** Date of inspection: April 11 and 12, 2019 LTCPR 6.1.5
Additional Requirements for Nursing Homes - The licensee shall ensure residents have an interdisciplinary assessment of risk, functional abilities, cognition, skin integrity, nutrition, oral health (see section 6.6), pain and discomfort, falls risk, and recreation, initiated upon admission to the home and completed within two weeks.
- 12.** Date of inspection: April 11 and 12, 2019 LTCPR 8.2.1.h
The licensee shall ensure policies and procedures that minimize risk to residents, staff, volunteers, visitors and the home are developed and followed. These include but are not limited to: an extremes of internal temperature policy and procedures to ensure internal temperatures are at acceptable levels.
- 13.** Date of inspection: April 11 and 12, 2019 LTCPR 8.2.2.b
The licensee shall ensure risk management programs that minimize risk to residents are developed, implemented and evaluated. These include but are not limited to: a falls prevention program is developed and implemented.