

Manitoba Ombudsman

November 21, 2016

The Honourable Margaret Wiebe
Chief Judge
Provincial Court of Manitoba
5th Floor – 408 York Avenue
Winnipeg, MB R3C 0P9

Dear Chief Judge Wiebe:

**Inquest into the death of Ann Hickey
Manitoba Families – Manitoba Development Centre
Our file 2014-0079**

As you are aware, it is the practice of my office to follow up on inquest recommendations when they relate to a provincial department, agency or municipality.

I am writing to advise you of the results of inquiries by my office concerning the inquest report and recommendations by the Provincial Court Judge R.L. Pollock on February 14, 2014.

Ms. Ann Hickey died on March 29, 2011 in the Portage District General Hospital. A resident at the Manitoba Development Centre (MDC) in Portage la Prairie for 41 years, Ms. Hickey's death was caused by strangulation on March 25, 2011 while she was in a wheelchair in a common room at MDC. The pressure of the wheelchair seatbelt on her neck, resulted in bronchopneumonia due to hypoxic encephalopathy.

The Honourable Judge Pollock made thirteen recommendations directed to Manitoba Families (the department). In May 2014, the department responded to our inquiries with information on steps it had taken with respect to the recommendations. However, as many of its proposed actions were to take place later in 2014, in 2015 and beyond, we delayed concluding this report until more details were available.

On September 12, 2016, the department sent my office its completed implementation report with the exception of one recommendation about data entry. That recommendation is reportedly in progress and scheduled for completion in April 2017.

The following are the recommendations and the responses we received to our inquiries:

RECOMMENDATIONS ABOUT CARE GUIDES:

That MDC produce Care Guides that give information and direction to PNAs¹ with utmost clarity by:

- (1) examining its Care Guides and identifying variations in entries that mean the same thing;
- (2) adopting a suitable uniform standard instead of those variations such that the reader will have unequivocal statements of fact and instruction;
- (3) scrutinizing its Care Guides and deleting contradictions perpetuated by obsolete data.

RESPONSE FROM MANITOBA FAMILIES:

Current Status: Complete

- *MDC redesigned the resident Care Guide format so that all safety-related information shows as the first focus at the top of page one of every resident's Care Guide.*
- *MDC conducted a communication survey that resulted in improved sharing of resident-related information (for example, changes and updates to an individual's Care Guide and at shift change on each residential area).*
- *MDC has further refined its definition of the term "monitor" to ensure that whenever the term is used in a document such as the Care Guide, it includes frequency and duration that allows for specific circumstances and professional discretion. Staff have received training in the refined definitions.*
- *The Momentum software has been updated to improve the flow and clarity of information within the application. Staff have received training on these updates.*

RECOMMENDATIONS ABOUT DATA ENTRY:

That MDC examine its automated data entry software and take such steps as are necessary to change it or replace it:

- (1) to enable input to resident Care Guide entries according to a suitable uniform standard;
- (2) to enable obsolete data to be identified and deleted;

RESPONSE FROM MANITOBA FAMILIES:

Current Status: In Progress

¹ PNAs – Psychiatric Nursing Assistants

- *Changes have been made to the Care Guide to improve the professional quality and consistency of the entries. Questionnaire development is ongoing and will continue to be re-evaluated on a regular basis to ensure the consistent communication of resident needs.*
- *Refresher education has been provided for professional staff.*
- *Frequent and in-depth audits are completed using continuous quality improvement processes. Feedback is provided to the staff regarding the results of these audits.*
- *Improvements continue to be made to the electronic questionnaires that populate data to the care guide focus statements to eliminate discrepancies and ensure updated assessment data is available on the Care Guide. Implementation of the remaining questionnaires is being rolled out at a rate of four every two months and will be complete at the end of April 2017.*

RECOMMENDATIONS ABOUT ELECTRONIC RECORDS:

That MDC:

- (1) enable all staff to have portable electronic access to Care Guides and other relevant resident information;
- (2) enable all staff to log observations, information and suggestions electronically.

RESPONSE FROM MANITOBA FAMILIES:

Current Status: Complete

- *Various technology options have been reviewed. This included determining what, if any, benefit there would be to introducing technology changes; an assessment of whether or not our current operating systems could support the technology changes; and, what training would be required for non-computer users to be able to effectively use the technology.*
- *All nursing and clinical staff have access to the electronic records.*
- *It was determined that it is not practical to provide all Psychiatric Nursing Assistants with portable access to electronic records; however MDC policy requires that any changes to the Care Plan for a resident require that the Care Guide for that resident*
- *be reprinted. Resident care is based on the direction of nursing staff and the continually updated Care Guides.*

The department explained that while providing all PNAs with portable access to electronic records is not practical, other changes have been made that serve to meet the intent of the recommendation as indicated:

Technical barriers within the managed environment makes this cost prohibitive and impractical, however, changes made to the care guides now give PNAs clear information and direction, thus meeting the expectations of the recommendation. The care guides are located in the Nursing Office on each area for easy access for PNAs.

It is the responsibility of the Nurse in Charge of the area to ensure care guides are reprinted when updates have been made and to chart this activity in a progress note. PNAs receive information regarding updates to the care guides at the Shift Change Report when they begin their shift. If a PNA begins their shift off regular hours, they are expected to review the daily journal, progress note book and communication book where they will receive information on changes to care guides.

RECOMMENDATION ABOUT CONTINUING TRAINING:

That MDC management hold periodic policy workshops for staff, scheduled in such a way that no staff member attends a policy workshop less than once every twelve months, with an agenda that includes an opportunity for staff input on policy issues.

RESPONSE FROM MANITOBA FAMILIES:

Current Status: Complete

- *New personnel are oriented to the MDC's General Policy and Procedure Manual.*
- *MDC reviews existing policies on a two-year cycle that includes: review by the appropriate stakeholders to ensure issues are identified and addressed; review by the policy management committee to ensure there is no conflict with other existing policies and language is consistent across policies; and review of the policy by MDC's Executive Management to ensure it and any changes are in keeping with the organizations philosophy and best practice in the field.*
- *MDC's existing policy development and review process offers staff at all levels of the organization an opportunity to initiate development of new policies, and to contribute improvements and refinements to all existing policies. Any existing policy can be reviewed prior to its scheduled two-year review date, if changes to procedures, new information or other factors warrant it. A new policy can be introduced at any time.*
- *MDC will continue to include staff from all levels of the organization in the development and review of policies.*

- *As existing policies are changed and as new policies are developed, they are circulated to all staff with a receipt and acknowledgement form for employees to sign and date. This receipt acknowledges that the employee has read and understands the policies.*
- *Revisions to policies are communicated to staff through Policy Days, team meetings, memos, and Executive Management's biannual open house sessions.*
- *Policy compliance is monitored through performance appraisals and the MDC Incident Risk Reporting process.*

RECOMMENDATION ABOUT RESIDENT TRANSFERS:

That the MDC resident transfer policy require written advice as to safety risk factors in the case of any transfer, regardless of any exigency, to accompany the resident and be provided to all staff on duty immediately and to be logged in a source to which future staff will be directed.

RESPONSE FROM MANITOBA FAMILIES:

Current Status: Complete

- *MDC's Residents' Internal Transfer policy was reviewed and revised in 2012.*
- *Further policy revisions include introducing a checklist to guide the activities related to resident transfers.*
- *MDC conducts regular audits of resident transfers to ensure that the processes outlined in the revised policy are being adhered to. The audit process includes soliciting feedback from the frontline care staff involved in the resident transfer process to ensure that improvements and refinements are captured and incorporated in future transfers.*

RECOMMENDATIONS ABOUT WHEELCHAIRS:

That MDC require a highly visible tag or label to identify for its staff:

- (1) that a wheelchair is not the user's own wheelchair;
- (2) that a wheelchair user is at risk for repositioning.

That therapists include in the Care Guide a statement whether or under what circumstances a resident must be kept in constant view when walking, using a wheelchair or other assist.

RESPONSE FROM MANITOBA FAMILIES:

Current Status: Complete

- *MDC developed and implemented a Wheelchair Policy to provide all MDC staff with direction and guidance regarding the use of wheelchairs at MDC. This included clear labelling of wheelchairs with residents' names, as well as a statement specifying that a resident should not be placed in a chair other than his/her own.*
- *MDC conducted a resident-by-resident clinical reassessment of the use of wheelchair positioning belts.*
- *MDC introduced the use of positioning belt clips to reduce the risk of the positioning belts inadvertently loosening and allowing room for an individual to slide down under the belt.*
- *The Wheelchair Policy was further revised to include a statement directing the physiotherapist and occupational therapist to specify how a resident is to be monitored, including whether and/or under what circumstances a resident must be kept in constant view when walking and/or using a wheelchair or other ambulation assist.*
- *Clinical reviews of each wheelchair user's circumstances are conducted to ensure that specific instructions are up-to-date prior to entering them into the Care Guide.*
- *Consideration was given to developing tags/labels that identify risk factors for specific wheelchair users (for example, at risk for sliding, or tipping out, etc.), however, it was determined that all residents who use wheelchairs are at risk, therefore all residents would require tags/labels. As an alternate solution additional training regarding wheelchair risks is now provided to staff.*
- *MDC developed and implemented a Monitoring Guidelines policy in February 2016 on the appropriate level of monitoring and documentation when safety and supervision interventions are needed for residents.*

RECOMMENDATION ABOUT INVESTIGATIONS:

That MDC, in consultation with police and other resources such as the CME and the Workplace Safety and Health Branch, establish an investigative protocol for gathering evidence of critical incidents, preserving it to enable analysis to be done and obtaining the results for its investigation reports.

RESPONSE FROM MANITOBA FAMILIES:*Current Status: Complete*

- *MDC has a process in place for conducting internal investigations.*

- *MDC has consulted with the RCMP and the Chief Medical Examiner's Office on the investigation process and has developed new protocols for future resident-related critical incident investigations. The revised process was approved in January 2016.*
- *Human Resources now takes a lead role to ensure investigations are at arm's length and transparent.*
- *MDC has access to the Department of Families' investigation processes and resources.*

Manitoba Families has responded to each of the judge's recommendations and provided my office with copies of a sample Care Guide, sample mobility and nutrition related questionnaires; and the policies² referenced in its responses. Copies of the relevant policies are attached to this report.

We also note that Judge Pollock makes reference to a report dated March 27, 2013 by James F. Gardener, Ph.D.³ and indicates that it would be prudent for the MDC to review Dr. Gardener's analysis "from time to time as MDC continues to work on improving its policies and operations and maintaining its accreditation." However, as this was not a formal recommendation, the department was not asked to provide its response.

Given that the department has provided its full response to the recommendations in the report, we will be concluding our monitoring of the implementation of the Ann Hickey inquest recommendations.

Please note, an electronic copy of this report will be posted on the Manitoba Ombudsman website: www.ombudsman.mb.ca.

Yours truly,

Charlene Paquin
Manitoba Ombudsman

cc: Mr. Jay Rodgers, Deputy Minister of Families
Dr. John Younes, A/Chief Medical Examiner

Enclosures

² MDC Policy V-90 Internal Resident Transfers, MDC Policy VII-40 Wheelchair Use, Acquisition, Maintenance and Modification; MDC Policy VII-05 Monitoring Guidelines; MDC Policy I-40 Incident Risk Reporting

³ Dr. James Gardener is an American expert in systems that measure quality of life for the disabled and systems that measure how well their care-givers deliver services. (para. 66, inquest report)