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INTERVENTION REPORT (EXCERPTS)

Intervention at Hôpital de Matane

**Centre intégré de santé et de services
sociaux du Bas-Saint-Laurent**

Québec City, May 13, 2021

THE INTERVENTION

On September 24, 2020, the Québec Ombudsman received information about the quality of the care and services delivered to patients on the medicine unit of Hôpital de Matane, a facility of Centre intégré de santé et de services sociaux (CISSS) du Bas-Saint-Laurent.

The Québec Ombudsman decided to intervene, particularly concerning the medicine unit on the 4th floor. It also analyzed the care provided to service users after their admission, while they are in the emergency room waiting for a bed on the medicine unit.

CONCLUSION

When the investigation was completed, the Québec Ombudsman concluded that there were significant shortcomings in the clinical procedure that should begin in the emergency room and continue on the medicine unit. The nursing staff omitted certain steps essential for ensuring safe and customized health care and health services.

Staffing issues are a constant in Matane, but this must not have an adverse effect on the quality of the care and services provided to users. The institution must act so that the deficiencies noted are corrected.

RECOMMENDATIONS

Given the preceding, the Québec Ombudsman recommends that CISSS du Bas-Saint-Laurent (Hôpital de Matane):

- R-1** **Ensure** that emergency room or medicine unit nursing staff collect the relevant information for each new episode of care, no later than 24 hours after the patient has been admitted.
- R-2** **Ensure** that emergency room or medicine unit nursing staff identify the risk factors for the functional decline of elderly patients by completing the AINÉES tool within 24 hours at most.
- R-3** **Ensure** that emergency room nursing staff screen all people aged 65 years and older for fall risk by asking them if they have fallen in the past 12 months and, if so, documenting the event in accordance with the institution's fall prevention and intervention program.
- R-4** **Ensure** that medicine unit nursing staff screen all people aged 65 years and older for fall risk, as well as those under age 65 who warrant such screening because of their clinical condition, as soon as they are admitted and when there is any significant change in their condition.
- R-5** **Ensure** that medicine unit nursing staff identify the factors associated with the fall risk observed, draft a progress note and produce or adjust a therapeutic nursing plan in accordance with the institution's fall prevention and intervention program.
- R-6** **Remind** the emergency room and medicine unit nursing staff of the importance of assessing, at the time of their admission and at regular intervals thereafter, all users predisposed to having pressure sores, in accordance with the pressure sore prevention and skin and wound care program.

By October 15, 2021, inform the Québec Ombudsman about what was done to implement all the recommendations made.

In accordance with the provisions of the *Act respecting the Health and Social Services Ombudsman* (CQLR, c. P-31.1) within 30 days of receiving this report, the institution must inform the Québec Ombudsman of whether it intends to implement the recommendations made to it, or of its reasons if it has decided not to act on them.



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