



**Ministry of Health and
Long-Term Care**

**Inspection Report under
the Long-Term Care
Homes Act, 2007**

**Ministère de la Santé et des
Soins de longue durée**

**Rapport d'inspection sous la
Loi de 2007 sur les foyers de
soins de longue durée**

**Health System Accountability and
Performance Division
Performance Improvement and
Compliance Branch**

**Division de la responsabilisation et de la
performance du système de santé
Direction de l'amélioration de la
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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Aug 16, 2013	2013_228172_0025	L-000542-13	Complaint

Licensee/Titulaire de permis

S & R NURSING HOMES LTD.

265 NORTH FRONT STREET, SUITE 200, SARNIA, ON, N7T-7X1

Long-Term Care Home/Foyer de soins de longue durée

AFTON PARK PLACE LONG TERM CARE COMMUNITY

1200 AFTON DRIVE, SARNIA, ON, N7S-6L6

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs

JOAN WOODLEY (172)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): July 31, 2013

During the course of the inspection, the inspector(s) spoke with the Executive Director, the Director of Care, 1 Registered Practical Nurse, 1 Life Enrichment Aide, 1 Personal Support Worker, 4 Residents, 1 Family member and a Physician.

During the course of the inspection, the inspector(s) made observations and reviewed health care records.

**The following Inspection Protocols were used during this inspection:
Personal Support Services**



Responsive Behaviours

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (A requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA.)	Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (Une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 6.
Plan of care**



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Specifically failed to comply with the following:

s. 6. (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,

(a) the planned care for the resident; 2007, c. 8, s. 6 (1).

(b) the goals the care is intended to achieve; and 2007, c. 8, s. 6 (1).

(c) clear directions to staff and others who provide direct care to the resident. 2007, c. 8, s. 6 (1).

Findings/Faits saillants :



1. The Licensee has failed to ensure the plan of care set out gives clear direction to staff and others, who provide direct care to the resident.

Care plan review revealed specific medication interventions related to pain management and sleep which have been discontinued or changed.
Staff interview with a member of the registered staff confirmed these medications are no longer prescribed or the dosage has changed.

Care plan indicates a physiotherapy program for a specific resident.
Resident observations revealed a different physiotherapy program for this resident.

Care plan indicates a type of transfer for a specific resident.
Resident observations revealed staff performing a different type of transfer.
Staff interview with a member of the registered nursing staff revealed a specific resident's care plan needed to be updated.

Resident observation reveals a posted note, related to positioning, specific to a resident for comfort.
No reference to the positioning of this resident for comfort was found on the care plan .

Resident has a special device to wear. Directions for application are available to staff.
Resident observations revealed it was not applied as per the manufacturer's directions.

Care plan review reveals Food services will provide a specific intervention.
Family interview revealed family is providing.
Staff interview with member of the registered staff revealed there is no physician's or Registered Dietitian's order for the nutritional intervention, however she believes the home is providing it. No documentation on the MARS was found. [s. 6. (1) (c)]



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Issued on this 22nd day of August, 2013

Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs

Joan L. Woodley, RN.