Ontario

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

Rapport d'inspection prévue le *Loi de 2007 les foyers de soins de longue durée*

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

Ministère de la Santé et des Soins de longue durée
Division de la responsabilisation et de la performance du système de santé
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Date(s) of Inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
November 3, 2010	2010-190-2263-03Nov112113	Complaint Log # L-01343

Licensee/Titulaire

Revera Long Term Care Inc. 55 Standish Court, 8th Floor, Mississauga, ON L5R 4B2

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

Banwell Gardens 3000 Banwell Road, Tecumseh, ON N8N 2M4

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

Sandra Fysh #190

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection related to personal care.

During the course of the inspection, the inspector spoke with the Administrator, the Director of Care, the RAI Coordinator, RN's, PSW's.

During the course of the inspection, the inspector reviewed clinical records of 1 Resident, reviewed policies related to personal care and observed staff practices and interactions with residents.

The following Inspection Protocols were used in part or in whole during this inspection:

- Continence Care and Bowel Management
- Personal Support Services

☒ Findings of Non-Compliance were found during this inspection. The following action was taken:

4 WN

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA. 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 suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée. Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with LTCHA,2007,S.O.2007,c8,s.6(1)(c) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out, clear directions to staff and others who provide direct care to the resident.

Findings:

1. The written plan of care for one resident indicates occasional incontinence. Progress notes state that the resident frequently removes the incontinent product. There are no interventions noted for staff to indicate frequency of checking the resident or prevention of odours.
2. The written plan of care indicates that the resident frequently refuses a bath, but there are no interventions or alternative approaches to assisting with hygiene.
3. The plan of care does not identify clear interventions to assist with hygiene tasks when resident requires assistance.

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WN #2: The Licensee has failed to comply with LTCHA,2007,S.O.2007,c8,s.6(11)(b) When a resident is reassessed and the plan of care reviewed and revised, if the plan of care is being revised because care set out in the plan has not been effective, the licensee shall ensure that different approaches are considered in the revision of the plan of care.

Findings:

1. The progress notes indicate that the resident frequently refuses toileting and use of incontinent products, but different approaches for staff to consider are not documented in the plan of care.

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WN #3: The Licensee has failed to comply with O.Reg.70/10,s.51(2)(b) Every licensee of a long-term care home shall ensure that, each resident who is incontinent has an individualized plan, as part of his or her plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented;	
Findings: 1. The plan of care for one resident is not individualized to promote bladder continence. It has been identified in progress notes and RAPS that the resident is occasionally incontinent and needs cueing for toileting but times noted are generic ac & pc meals and bedtime.	
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WN #4: The Licensee has failed to comply with O.Reg.70/10,s.8(1)(b) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure , strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system, (b) is complied with.	
Findings: 1 Policy LTC-N-05 related to Bowel and Bladder Continence Care Program Implementation has not been followed which states that Residents are to be toileted every two hours, or more frequently in accordance with interventions indicated in their individual plan of care. 2. Policy LTC-N-05 related to Bowel and Bladder Continence Care Program Implementation has not been followed which states that Residents who self-toilet will be monitored to ensure hygiene practices are carried out.	
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Signature of Licensee or Representative of Licensee **Signature du Titulaire du représentant désigné**	**Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.** Nov 26/10
Title: **Date:**	**Date of Report:** (if different from date(s) of inspection).