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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☐ **Licensee Copy/Copie du Titulaire** ☒ **Public Copy/Copie Public**

Date(s) of inspection/Date de l'inspection	**Inspection No/ d'inspection**	**Type of Inspection/Genre d'inspection**
September 15, 17, 20, 2010	2010_107_1023_16Sep210910 2010_169_1023_24Aug140929	Complaint – H-00249

Licensee/Titulaire
Brantwood Manor Nursing Homes Limited, c/o Ernst and Young Inc. - 222 Bay Street, TD Centre, P.O. Box 251, Toronto ON, M5K 1J7

Long-Term Care Home/Foyer de soins de longue durée
Brantwood Lifecare Centre, 802 Hagar Avenue, Burlington ON, L7S 1X2

Name of Inspector(s)/Nom de l'inspecteur(s)
Michelle Warrener - #107
Yvonne Walton - #169

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection related to resident care and snack service.

During the course of the inspection, the inspectors spoke with: The resident, the Administrator, Dietary Manager, Director of Care, 2nd floor nursing and dietary staff and residents.

During the course of the inspection, the inspectors: reviewed a resident's health record, observed an afternoon and evening snack service, spoke with residents and staff. An on-site visit to the home and the resident home area 2 West was completed. (The Home was in respiratory outbreak from Aug 23-Sept 7, 2010).

The following Inspection Protocols were used during this inspection:
Nutrition and Hydration
Snack Observation

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

[3] WN
[1] VPC

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

Findings:

1. The plan of care for an identified resident does not provide clear direction to staff who provide care in relation to the level of assistance required for eating. The plan of care states the resident requires full feeing assistance at meals, however, the plan also states that the resident requires only limited assistance with eating to be provided intermittently and to promote the resident's level of independence as much as possible.

WN #2: The Licensee has failed to comply with LTCHA, 2007, S.O. 2007, c.8, s.6(9)1
6 (9) The licensee shall ensure that the following are documented:
1. The provision of the care set out in the plan of care.

Findings:

1. An identified resident did not have documentation of care provided in relation to food and fluid intake at meals and snacks. The resident's plan of care requires monitoring of the amount of beverage intake and foods consumed, however, food and fluid intake documentation is incomplete. Documentation was not completed for 3 meals and 10 snacks for the month of July 2010 and 5 snacks and one meal for the month of August 2010.

Additional Required Actions:

VPC - pursuant to the *Long-Term Care Homes Act, 2007*, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance with documenting the provision of the care set out in the plan of care, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with O.Reg. 79/10, s. 33(1).
33(1) Every licensee of a long-term care home shall ensure that each resident of the home is bathed, at a minimum, twice a week by the method of his or her choice and more frequently as determined by the resident's hygiene requirements, unless contraindicated by a medical condition.

Findings:

1. An identified resident requested a tub bath to be provided twice per week and the staff provided showers. There is no reason provided for the change in method of bathing. The resident is not provided with a method of bathing of their choice.

Inspector ID #:	169

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.** Y Waelton / Y Wanener
Title: **Date:**	**Date of Report:** (if different from date(s) of inspection). Oct 20/10