



**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

London Service Area Office
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**Ministère de la Santé et des Soins de
longue durée**

Division de la responsabilisation et de la performance du
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Licensee Copy/Copie du Titulaire



Public Copy/Copie Public

Date of inspection/Date de l'inspection
October 29, 2010

Inspection No/ d'inspection
2010_105_2636_01Nov094742

Type of Inspection/Genre d'inspection
L-01497 Complaint

Licensee/Titulaire

Caressant Care Nursing and Retirement Homes Ltd. 264 Norwich Ave. Woodstock ON N4S 3V9

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

Caressant Care Woodstock NH 81 Fyfe Ave. Woodstock ON N4S 8Y2

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

June Osborn #105

Inspection Summary/Sommaire d'inspection

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

During the course of the inspection, the inspector spoke with the administrator, the DOC, the wound care nurse and a PSW.

During the course of the inspection, the inspector reviewed the medical record including the plan of care, reviewed skin and wound policy.

The following Inspection Protocols were used in part or in whole during this inspection: Skin and Wound Care



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

2 WN

2 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 O. Reg. 79/10, s.50(2)(b)(iv).

Every licensee of a long-term care home shall ensure that, a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, is reassessed at least weekly by a member of the registered nursing staff, if clinically indicated;

Findings:

1. Slit on coccyx noted August 12, 2010,
Weekly assessments noted as August 26, September 1, September 8, September 16, October 4, and October 12, 2010

Inspector ID #: 105

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 O. Reg. 79/10, s.50(2)(b)(iv), to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O. Reg. 79/10 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 Number SWV.8, Subject: Treatment Protocol-Stage II Ulcer, Intervention #7; States Evaluate site of wound x 3 days as per policy and procedure. Then a minimum of every 7 days following for two weeks. If the wound is not healing after 17 days, discuss treatment change with the physician.

Slit on coccyx noted August 12, 2010,

Weekly assessments noted as August 26, September 1, September 8, September 16, October 4, and October 12, 2010.

Inspector ID #: 105

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 O. Reg. 79/10 s. 8(1)(b), to be implemented voluntarily.

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.



Title:

Date:

Date of Report:

November 3, 2010