

**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
Direction de l'amélioration de la performance et de la conformité

Hamilton Service Area Office
119 King Street West, 11th Floor
Hamilton, ON L8P 4Y7

Telephone: 905-546-8294
Facsimile: 905-546-8255

Bureau régional de services de Hamilton
119, rue King Ouest, 11^{ème} étage
Hamilton, ON L8P 4Y7

Téléphone: 905-546-8294
Télécopieur: 905-546-8255

Inspection Report under the LTC Homes Act, 2007 XPublic Copy Licensee Copy		Rapport d'inspection prévue de la Loi de 2007 les foyers de soins de longue durée Copie du Titulaire XCopie de la Publique	
Date(s) of inspection/Date de l'inspection November 2, 2010		Inspection No/ d'inspection 2010_168_8521_02Nov125231	Type of Inspection/Genre d'inspection Complaint H-01643
Licensee/Titulaire The Elliott, 170 Metcalfe Street, Guelph, Ontario, N1E 4Y3			
Long-Term Care Home/Foyer de soins de longue durée The Elliott Community, 170 Metcalfe Street, Guelph, Ontario, N1E 4Y3			
Name of Inspector(s)/Nom de l'inspecteur(s) Lisa Vink Inspector – Nursing #168			
Inspection Summary/Sommaire d'inspection			
The purpose of this inspection was to conduct a Complaint inspection concerning an identified resident's management of wounds. During the course of the inspection, the inspector spoke with: the Administrator, Director of Care, and registered nursing staff. During the course of the inspection, the inspector: reviewed the clinical record, reviewed the Wounds and Pressure Ulcers Prevention and Treatment policy and procedure and observed the presence of wound care supplies. The following Inspection Protocols were used during this inspection: Skin and Wound Care 2 Findings of Non-Compliance were found during this inspection. The following action was taken: 2 WN 1 VPC			

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'exigences 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.

NON-COMPLIANCE / (Non-respectés)

Definitions/Définitions

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

WN#1: The Licensee has failed to comply with: LTCHA, 2007, S.O. 2007, c.8, s6(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,
(c) clear directions to staff and others who provide direct care to the resident.

Findings:

On November 2, 2010, the current treatment for an identified resident with a wound was not recorded on the document that staff refers to as the "care plan". This document describes the previous treatments of this area as ordered by the physician. The resident's plan of care does not give clear direction to staff providing care, as the care plan is not consistent with the current orders as provided by the physician.

Inspector ID# 168

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 corrective action for achieving compliance for, ensuring that the written plan of care for residents provides clear direction for staff and others providing care, to be implemented voluntarily.

WN#2: The Licensee has failed to comply with: O. Reg. 79/10, s. 50(2)

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

Findings:

An identified resident has a wound for which is receiving treatment. Since September 22, 2010, this area has been assessed, by a member of the registered nursing staff, on September 28, 2010, October 6, October 12 and 25, 2010, which is not weekly.

Inspector ID# 168

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'exigences 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.

Signature of Licensee of Designated Representative 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 (if different from date(s) of inspection). <i>U. Smith - December 6/10</i>