



**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
Apr 25, 2013	2013_179103_0018	O-001891-12	Critical Incident System

Licensee/Titulaire de permis

COUNTY OF LENNOX AND ADDINGTON
97 Thomas Street East, NAPANEE, ON, K7R-4B9

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

THE JOHN M. PARROTT CENTRE
309 BRIDGE STREET WEST, NAPANEE, ON, K7R-2G4

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

DARLENE MURPHY (103)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): April 24-25, 2013

During the course of the inspection, the inspector(s) spoke with Personal support workers (PSW), Registered Practical Nurses (RPN), the RAI coordinator and the Assistant Manager of Nursing Services.

During the course of the inspection, the inspector(s) made resident observations, reviewed resident health care records and reviewed the home's policy on fall prevention.

**The following Inspection Protocols were used during this inspection:
Falls Prevention**

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend

WN – Written Notification
VPC – Voluntary Plan of Correction
DR – Director Referral
CO – Compliance Order
WAO – Work and Activity Order

Legendé

WN – Avis écrit
VPC – Plan de redressement volontaire
DR – Aiguillage au directeur
CO – Ordre de conformité
WAO – Ordres : travaux et activités



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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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 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.

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**

Specifically failed to comply with the following:

s. 6. (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan. 2007, c. 8, s. 6 (7).

Findings/Faits saillants :



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1. The licensee has failed to comply with LTCHA, 2007 s. 6 (7) whereby the care set out in the plan of care for a resident was not provided as specified in the plan.

Resident #1 is cognitively impaired and has been assessed as being a high risk for falls. On an identified date, Resident #1 was found partially on the fall mat on the floor beside the bed and was assessed as having no injuries. At the time of the incident, staff noted there was no bed alarm on the bed. An alarm was applied at that time.

On another identified date, a PSW removed Resident #1's rear fastening seat belt and transferred the resident into a chair in the lounge. The PSW failed to reapply the seat belt, left the resident unattended and a short time later, Resident #1 fell and sustained a fractured pelvis.

The RAP assessment and the resident care plan in effect at the time of the two incidents included the following interventions to decrease falls and ensure resident safety:

- rear fastening seat belt when up in wheelchair,
- monitor every two hours during the night,
- bed alarm on bed,
- blue mat on floor by bed and
- bed in lowest position.

The staff failed to provide care to Resident #1 as specified in the plan of care and the resident sustained injuries as a result. [s. 6. (7)]

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 to ensure all staff provide the fall prevention interventions for Resident #1 in accordance with the plan of care at all times, to be implemented voluntarily.



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Issued on this 25th day of April, 2013

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

Doreen Murphy