

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

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**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

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		Licensee Copy/Copie du Titulaire ☒ Public Copy/Copie Public
Date(s) of inspection/Date de l'inspection September 28, 29 and 30, 2010	Inspection No/ d'inspection 2010_167_9544_29Sep093133	Type of Inspection/Genre d'inspection Other related to CIS H-00221
Licensee/Titulaire The John Noble Home 97 Mount Pleasant Street, Brantford, Ontario N3T1T5		
Long-Term Care Home/Foyer de soins de longue durée The John Noble Home 97 Mount Pleasant Street, Brantford, Ontario N3T1T5		
Name of Inspector Marilyn Tone - Long Term Care Homes Inspector - Nursing -#167		
Inspection Summary/Sommaire d'inspection		

The purpose of this inspection was to conduct an other inspection related to a critical incident report.

During the course of the inspection, the inspector spoke with: Administrator, Director of Care and the Assistant Director of Care.

During the course of the inspection, the inspector: Conducted a review of the health records for both residents involved in this CIS report and reviewed the home's policies and procedures related to abuse.

The following Inspection Protocols were used in part or in whole during this inspection:
 Prevention of Abuse and Neglect Inspection Protocol
 Responsive Behaviours Inspection Protocol

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

[1] 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/Régleur 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 53(1)

53(1) Every licensee of a long-term care home shall ensure that the following are developed to meet the needs of residents with responsive behaviours:

- 1) Written approaches to care, including screening protocols, assessment, reassessment and identification of behavioural triggers that may result in responsive behaviours, whether cognitive, physical, emotional, social, environmental or other.

Findings:

- 1) The written plans of care for the two residents involved in this critical incident report do not give clear direction to staff related to situations that may trigger altercations. Example: These two residents have frequent negative interactions that at times escalate to becoming physical. Neither of the plans of care for these residents indicate that the other resident is a potential trigger for responsive behaviours.
- 2) The plans of care for these two residents do not address monitoring activities or other interventions to assist in the prevention of responsive behaviours between them.
- 3) There is also no record that the home explored other alternatives to assist in the prevention of responsive behaviours.

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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 that written approaches to care and identification of behavioural triggers are included in the plans of care for residents with responsive behaviours, 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: (if different from date(s) of inspection). 	