



**Inspection Report
under the *Long-Term
Care Homes Act, 2007***

**Rapport d'inspection
prévus 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

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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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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
Oct. 5, 2010	2010_112_2729_05Oct085735	Follow Up

Licensee/Titulaire

Sharon Farms & Enterprises Limited, 1340 Huron St London, ON N5V 3R3

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

Kensington Village, 1340 Huron St. London, ON N5V 3R3

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

Carole Alexander # 112 and Brenda Gauld #187

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a follow up investigation to outstanding unmet criteria related to:

- 1) medication errors and reporting
- 2) Reporting of changes in resident condition
- 3) Resident toileting schedules
- 4) Medication administration per physician orders

During the course of the inspection, the inspectors spoke with: Assistant Director of Care, Registered staff and 2 PSWs.

During the course of the inspection, the inspectors: Reviewed in home incident reporting from May 2010 to October 2010, critical incidents submitted to The Director from May 2010 to October 2010 and 3 resident charts.

The following Inspection Protocols were used in part or in whole during this inspection:

- 1) Medication administration
- 2) Continence Care and Bowel Management



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

2 WN
2 VPC

Corrected Non-Compliance is listed in the section titled Corrected Non-Compliance.

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. 51(2)(b)

Every licensee of a long-term care home shall ensure that,

(b) each resident who is incontinent has an individualized plan, as part of his or her plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented;

Findings:

1. A resident is totally incontinent according to 2 PSWs. Her plan of care indicates she is continent of both bowel and bladder.

2. A resident is put on the commode twice on the day shift according to 2 PSWs. His plan of care indicates he cannot use the commode related to behaviors.

Inspector ID #: 187

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 the implementation of individualized incontinent plans, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with LTCHA, 2007, S O. 2007, c.8, s.6(7)

Every licensee of a Long-Term Care home shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan,

Findings:

1. One resident's plan of care indicates she is continent but 2 PSWs said she is totally incontinent.

2. One resident's plan of care says he cannot use the commode but 2 PSWs said he is put on the commode twice during the day shift.

Inspector ID #: 187

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 the plan of care reflecting what is provided to a resident, to be implemented voluntarily.

CORRECTED NON-COMPLIANCE Non-respects à Corrigé				
REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	ACTION/ ORDER #	INSPECTION REPORT #	INSPECTOR ID #
Long Term Care Program Manual	Unmet criteria R8.2	N/A	2010_112_2729_05Oct085735	112
Long Term Care Program Manual	Unmet criteria B4.1	N/A	2010_112_2729_05Oct085735	112

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). October 15, 2010	