



**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
291 King Street, 4th Floor
London ON N6B 1R8

Bureau régional de services de London
291, rue King, 4^{ième} étage
London ON N6B 1R8

**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

Telephone: 519-675-7680
Facsimile: 519-675-7685

Téléphone: 519-675-7680
Télécopieur: 519-675-7685

☐ Licensee Copy/Copie du Titulaire ☒ Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection November 9 & 10, 2010	Inspection No/ d'inspection 2010-155-2917-09Nov203254	Type of Inspection/Genre d'inspection Complaint L-01597
--	---	---

Licensee/Titulaire
Devonshire Erin Mills Inc., 195 Dufferin Avenue Suite 800, London, ON N6A 1K7

Long-Term Care Home/Foyer de soins de longue durée
Lanark LTC Centre, 46 Lanark Crescent, Kitchener, ON N2N 2Z8

Name of Inspector(s)/Nom de l'inspecteur(s)
Sharon Perry #155

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection regarding responsive behaviours.

During the course of the inspection, the inspector spoke with: Administrator, Registered Nurse, Social Worker, Personal Support Worker, and two residents.

During the course of the inspection, the inspector: reviewed clinical records of two residents; and observed resident on Maple unit.

The following Inspection Protocols were used during this inspection:
Responsive Behaviours
Dignity, Choice and Privacy

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

3 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 LTCHA, 2007, S.O.2007, c.8, s.3(1)8

Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

Every resident has the right to be afforded privacy in treatment and in caring for his or her personal needs.

Findings:

1. There are documented episodes of a resident wandering into another resident's room on October 16, 17, 18, 20, 22, 24, and 30, 2010.
2. On October 22, 2010 in the evening a resident opened the door and entered the room of another resident while the Personal Support Worker was changing the resident's brief. The resident was naked at the time.

WN #2: The Licensee has failed to comply with LTCHA, 2007, S.O. 2007, c.8, s.6(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, clear directions to staff and others who provide direct care to the resident.

Findings:

1. The plan of care for resident states that Social Worker and staff will provide support while new resident settles in. Plan does not clarify as to how or when this is to happen.
2. Plan of care for resident indicates that they are to be checked every 15 minutes for their whereabouts. Inspector observed resident on November 10, 2010 from 1055 to 1115 and no staff checked on resident.

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 ensuring that clear directions are provided for staff providing direct care to residents, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with LTCHA, 2007, S.O. 2007, c.8, s.6(7)

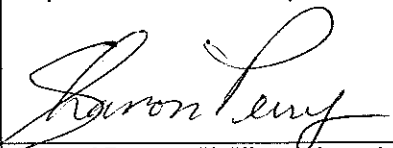
The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

Findings:

1. On November 6, 2010 care plan was updated to include social work as resident very anxious about another resident wandering into their room. Expected outcome is that resident will be less anxious in the next quarter. Interventions are social worker and staff will provide support to the resident while new resident settles in. As of November 10, 2010 at 1500 hours there is no documentation to support that social work has offered any support to the resident. On November 10, 2010 inspector interviewed the resident. Resident denied that social worker has talked to them since the October 22, 2010 incident of being seen naked. Resident keeps a journal and has it noted in their journal that a nurse spoke with them on October 23, 2010.
2. Social Worker says that she has seen the resident however there is not any documentation regarding visits or support given to resident.
3. Plan of care for resident states to monitor for safety/whereabouts every 15 minutes. On November 10, 2010 inspector observed resident from 1055 to 1115 and no staff checked resident. Behaviour monitoring record indicates that staff checked resident at 1030 hours and again at 1100 hours.

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 ensuring that the care set out in the plan is provided to the resident, 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). November 22, 2010