



**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
performance et de la conformité**

**Ottawa Service Area Office
347 Preston St, 4th Floor
OTTAWA, ON, K1S-3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670**

**Bureau régional de services d'Ottawa
347, rue Preston, 4^{ième} étage
OTTAWA, ON, K1S-3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670**

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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
Jul 2, 2013	2013_179103_0031	O-000164- 13, O- 002374-12	Critical Incident System

Licensee/Titulaire de permis

**UNITED COUNTIES OF LEEDS AND GRENVILLE
746 County Road 42, P.O Box 100, ATHENS, ON, K0E-1B0**

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

**MAPLE VIEW LODGE
746 COUNTY ROAD, 42 EAST, P.O. BOX 100, ATHENS, ON, K0E-1B0**

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

DARLENE MURPHY (103)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): June 27-28, 2013

**During the course of the inspection, the inspector(s) spoke with Personal
support workers (PSW), the Director of Care and the Administrator.**

**During the course of the inspection, the inspector(s) reviewed resident health
care records.**

The following Inspection Protocols were used during this inspection:



Falls Prevention

Responsive Behaviours

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
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 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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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 was not provided to the resident as specified in the plan.

Resident #2 was assessed to be at a moderate risk of falls. On an identified date, the resident fell at the bedside and sustained injuries. According to the plan of care in effect at the time of the fall, the resident was to have a bed alarm in place as a fall prevention measure.

In an interview with the Director of Care and according to the reported critical incident, the bed alarm was assessed post fall and was found to be non functioning.

The home implemented a bed alarm monitoring form for home wide use. Personal Support Workers were interviewed and advised the form is being completed at the beginning and end of each shift and malfunctions must be reported to the charge staff immediately. [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 bed alarms utilized to reduce resident fall risks are in good working condition, to be implemented voluntarily.

Issued on this 2nd day of July, 2013

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

A handwritten signature in cursive script, appearing to read "Darlene Murphy", written in black ink.

