



**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**

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|-------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <b>Date(s) of inspection/Date de l'inspection</b><br>September 29, 2010 | <b>Inspection No/ d'inspection</b><br>#2010-144-2760-29Sept112404 | <b>Type of Inspection/Genre d'inspection</b><br><b>Complaint</b><br>L-01064<br>IL-14693-LO |
|-------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------------------------------|

**Licensee/Titulaire**  
Meritus Care Corporation, 567 Victoria Avenue, Windsor, ON N9A 4N1

**Long-Term Care Home/Foyer de soins de longue durée**  
Regency Park, 567 Victoria Avenue, Windsor, ON N9A 4N1

**Name of Inspector(s)/Nom de l'inspecteur(s)**  
Carolee Milliner (#144) & Sandra Fysh (#190)

**Inspection Summary/Sommaire d'inspection**

The purpose of this inspection was to conduct an infoline complaint inspection related to the provision of resident care.

During the course of the inspection, the inspectors spoke with: the Food Service Supervisor, the charge nurse, one RPN, one PSW & the physiotherapist assistant.

During the course of the inspection, the inspectors reviewed one resident clinical record & the home policies related to use of toilets & commodes.

The following Inspection Protocols were used in part or in whole during this inspection:  
Continence  
Personal Support Services

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

## 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. c.8,s.6(1)(b)  
 Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,  
 (b) the goals the care is intended to achieve.

**Findings:**

1. The written plan of care for one resident does not set out the goals the care is intended to achieve related to a urinary tract infection & antibiotic treatment.

**Inspector ID #:** #144 #190

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

**Findings:**

1. The written plan of care for one resident conflicts with information provided by staff related to toileting.

**Inspector ID #:** #144 #190

**WN #3:** The Licensee has failed to comply with LTCHA, 2007, S.O. 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. The care being provided to the resident is not reflective of the care set out in the plan of care. related to toileting.

**Inspector ID #:** #144 #190

**WN #4:** The Licensee has failed to comply with O. Reg. 79/10, s.25(1)(a).  
Every licensee of a long-term care home shall ensure that,  
(a) the assessments necessary to develop an initial plan of care under subsection 6 (6) of the Act are completed within 14 days of the resident's admission.

**Findings:**

1. A physiotherapy assessment necessary to develop the initial plan of care was not completed within 14 days of admission for one resident.

**Inspector ID #:** #144 #190

**WN #5:** The Licensee has failed to comply with O. Reg. 79/10, s.51(2)(a).  
Every licensee of a long-term care home shall ensure that,  
(a) each resident who is incontinent receives an assessment that includes identification of causal factors, patterns, type of incontinence and potential to restore function with specific interventions, and that where the condition or circumstances of the resident require, an assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for assessment of incontinence;

**Findings:**

1. An admission bowel & bladder assessment has not been completed for one resident.

**Inspector ID #:** #144 #190

**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 28, 2010