

**Ministry of Health and Long-Term Care**Health System Accountability and Performance Division
Performance Improvement and Compliance Branch**Ministère de la Santé et des Soins de longue durée**Division de la responsabilisation et de la performance du système de santé
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Inspection Report under the LTC Homes Act, 2007 X Public Copy Licensee Copy		Rapport d'inspection prevue de le Loi de 2007 les foyers de soins de longue durée Copie du Titulaire X Copie de la Publique	
Date(s) of inspection/Date de l'inspection August 11-12, 2010	Inspection No/ d'inspection 2010_106_2866_10Aug155841	Type of Inspection/Genre d'insptection Mandatory Report	
Licensee/Titulaire Revera Long Term Care INC			
Long-Term Care Home/Foyer de soins de longue durée Roseview Manor			
Name of Inspector(s)/Nom de l'inspecteur(s) Margot Burns-Prouty (ID# 106)			
Inspection Summary/Sommaire d'inspection			
The purpose of this inspection was to conduct a/an Mandatory Report inspection The inspection was conducted by Margot Burns-Prouty (ID#106). The inspection occurred on August 11-12, 2010. During the course of the inspection, the inspector(s) spoke with: Administrator, Director of Care and Services, ADOC, Registered Nurse, Registered Practical Nurses, and Personal Support Workers. The following Inspection Protocols were used in part or in whole during this inspection: - Falls Prevention Corrected Non-Compliance is listed in the section titled Corrected Non-Compliance. 4 Findings of Non-Compliance were found during this inspection. The following action was taken: 4 WN 1 VPC 0 Co: CO#			

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'exigences 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.

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Plan of correction/Plan de redressement
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

WN#1: The Licensee has failed to comply with: **LTCHA, 2007, S.O. 2007, C. 8, S 15(2)(a):**

Every licensee of a long-term care home shall ensure that, the home, furnishings and equipment are kept clean and sanitary;

Findings: This was found not to be in compliance as furnishings, equipment and fixtures were found to be dirty and/or unsanitary on August 11, 2010.

Cheshire House Area:

1. In a resident washroom dried feces on toilet seat
2. In a resident washroom toilet rim was had dirt and stains
3. Den A312: large armchair's arms heavily soiled with stains on seat
4. Room 3114: in resident washroom sink heavily soiled with dried phlegm in sink and a dirty bed pan sitting on back of toilet
5. In a resident washroom sink was soiled
6. In a resident washroom, dried feces found on raised toilet seat

Celeste House Area:

7. In a resident washroom, stain on floor in front of toilet
8. Sunroom B212: burgundy arm chair heavily soiled on arms and other fabric chairs soiled and stained
9. Room 2203: resident washroom, raised toilet seat soiled

Primrose House Area:

10. In a resident washroom, dirty urine hat sitting back of toilet
11. In a resident wash room, dirty bedpan sitting on back of toilet

Champlain House Area

12. Sunroom: fabric on chairs stained
13. A 112 Den: fabric on chairs stained
14. A 180 Living room: fabric on chairs stained

Heritage House Area

15. Tub room: heavy build up of dust and dirt behind tub
16. B 145 Living room: fabric on chairs soiled and stained
17. B 109: fabric on chairs stained
18. B 112 Den: Beige couch very heavily soiled and stained; fabric is stained on the other chairs in room.

Inspector ID#: 106

Required Compliance Date: August 23, 2010

WN#2: The Licensee has failed to comply with: **LTCHA, 2007, S.O. 2007, C. 8, S. 6 (10) (b):**

The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when, the resident's care needs change or care set out in the plan is

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Le suivant constituer un avis d'écrit de l'exigences 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.

no longer necessary;

Findings: This was found not to be in compliance as there are interventions in resident's plan of care that are no longer necessary.

1. Written plan of care intervention initiated Jan. 10/10 for a resident states, "monitor blood work as required". A newer intervention initiated Aug. 6/10 after a significant change in resident status states, "no invasive procedures (ie vitals, cath, gluc, ect.)".

Inspector ID#: 106

Required Compliance Date: August 23, 2010

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: This was found not to be in compliance as the care set out in the plan of care in not provided to the resident as specified in the plan.

1. Review of the progress notes from the date a resident fell indicates that the resident's bed was not in the lowest position and side rails were raised. The resident's plan of care intervention initiated Jan. 10/10 states "ensure both side rails down at all times when in bed".
2. During a staff interview completed with RPN on Aug 12/10; the staff member reported that the resident is checked every 2 hours when resident is repositioned. Written plan of care states that resident to be checked every hour.
3. During a staff interview on August 12, 2010 with a PSW who provides direct care to a specific resident stated that the resident does not use a bed alarm, tabs monitor or floor pads. Written plan of care intervention initiated July 26, 2010 states, "apply bed alarm and position floor pads beside bed."

VPC- Pursuant to LTCHA, 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 LTCHA, 2007, S.O. 2007, C. 8, S. 6 (7) in respect of written notification 3. This is to be implemented voluntarily.

Inspector ID#: 106

Required Compliance Date: August 23, 2010

WN#4: The Licensee has failed to comply with: **O. REG. 79/10, S. 49(2):**

Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that where the condition or circumstances of the resident require, a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls.

Findings: This was found to be in non-compliance as a post-fall assessment was not conducted after a resident fell.

1. Only an incident report completed after a resident fell on July 19, 2010; no post-falls assessment was

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Le suivant constituer un avis d'écrit de l'exigences 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.

conducted using a clinically appropriate assessment instrument that is specifically designed for falls.

Inspector ID#: 106

Required Compliance Date: August 23, 2010

WN#5: The Licensee has failed to comply with:

Findings:

1.

Inspector ID#:

Required Compliance Date:

WN#6: The Licensee has failed to comply with:

Findings:

1.

Inspector ID#:

Required Compliance Date:

WN#7: The Licensee has failed to comply with:

Findings:

1.

Inspector ID#:

Required Compliance Date:

WN#8: The Licensee has failed to comply with:

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Le suivant constituer un avis d'écrit de l'exigences prévue le paragraph 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.

Findings:

19.

Inspector ID#:

Required Compliance Date:

WN#9: The Licensee has failed to comply with:

Findings:

20.

Inspector ID#:

Required Compliance Date:

CORRECTED NON-COMPLIANCE Non-respectés à Corrigé			
REQUIREMENT EXIGENCE	ORDER ORDRE		INSPECTOR ID #

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Le suivant constituer un avis d'écrit de l'exigences prévue le paragraph 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.

Signature of Licensee of Designated Representative 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). August 13, 2010	