



**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
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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
Oct 29, 2013	2013_217137_0043	L-000798-13	Critical Incident System

Licensee/Titulaire de permis

**SPRUCE LODGE HOME FOR THE AGED
643 West Gore Street, STRATFORD, ON, N5A-1L4**

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

**SPRUCE LODGE HOME FOR THE AGED
643 WEST GORE STREET, STRATFORD, ON, N5A-1L4**

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

MARIAN MACDONALD (137)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): October 29, 2013

During the course of the inspection, the inspector(s) spoke with Administrator, Acting Director of Care, one Registered Nurse, one Administrative Assistant, one Personal Support Worker and one resident.

During the course of the inspection, the inspector(s) observed resident, toured resident's bedroom, reviewed resident's clinical records, Falls Prevention Program and relevant policies and procedures.

The following Inspection Protocols were used during this inspection:
Falls Prevention

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	WAO – Ordres : travaux et activités



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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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 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.

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 O.Reg 79/10, s. 221. Additional training — direct care staff

Specifically failed to comply with the following:

s. 221. (1) For the purposes of paragraph 6 of subsection 76 (7) of the Act, the following are other areas in which training shall be provided to all staff who provide direct care to residents:

1. Falls prevention and management. O. Reg. 79/10, s. 221 (1).

Findings/Faits saillants :



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1. The Licensee failed to ensure that direct care staff are provided training in falls prevention and management as evidenced by:

A review of the policy, Falls Prevention Program - # RCM 2.1 - Dated January 2012 - Revised June 20, 2013. under Staff Training and Education, indicates:

1. Falls prevention Program Policy will be reviewed with all new staff during orientation, including the importance of the program and the risk to residents' health due to falls.

2. Online Annual Training on Falls Prevention Program.

There is no documented evidence that direct care staff are provided annual training in falls prevention and management.

The Acting Director of Care confirmed there has been no formal falls prevention training provided to staff since April 2011. [s. 221. (1) 1.]

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 that direct care staff are provided training in falls prevention and management, to be implemented voluntarily.

Issued on this 29th day of October, 2013

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

Marian C. Mac Donald