Ontario

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

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

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Date of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
September 14, 2010	2010-137-9578-14Sep093029	Critical Incident M578-000023-10 L-00981

Licensee/Titulaire
Regional Municipality of Waterloo
150 Frederick Street
Kitchener, ON N2A 4J3

Long-Term Care Home/Foyer de soins de longue durée
Sunnyside Home
247 Franklin Street North
Kitchener, ON N2A 1Y5

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

Marian C. Mac Donald - # 137

Inspection Summary/Sommaire d'inspection

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

During the course of the inspection, the inspector spoke with: Administrator, Quality & Risk Coordinator, RN, PSW and physiotherapist.

During the course of the inspection, the inspector: reviewed resident records related to plan of care, lift/transfer status, progress notes, incident report, cognitive status, means of mobility and restraint use.

There were no Inspection Protocols used in part or in whole during this inspection:

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

[2] 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 O. Reg. 79/10, s.36
Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents.

Findings:
For the resident identified in the CIS, the plan of care indicated resident was at risk of injury from falls and to have a lap belt applied for safety. The shower chair, used at the time of the fall, did not have a safety belt.

Inspector ID #: 137	

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, related to safe positioning devices, to be implemented voluntarily.

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,
(c) clear directions to staff and others who provide direct care to the resident.

Findings:
For the resident identified in the CIS, the plan of care indicates resident uses a sit to stand transfer aid. Resident is unable to weight bear and uses a ceiling lift. Plan of care does not identify that the resident also uses a tilt wheelchair with a lap belt for safety.

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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, related to clear directions to staff, 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. Marian L. MacDonald
Title: Date:	Date of Report: September 15, 2010