



**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

London Service Area Office
291 King Street, 4th Floor
London ON N6B 1R8

Bureau régional de services de London
291, rue King, 4^{ième} étage
London ON N6B 1R8

**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

Telephone: 519-675-7680
Facsimile: 519-675-7685

Téléphone: 519-675-7680
Télécopieur: 519-675-7685

☐ Licensee Copy/Copie du Titulaire ☒ Public Copy/Copie Public

Date(s) of Inspection/Date de l'inspection July 21, 2010	Inspection No/ d'inspection 2010-155-2690-21Jul093310	Type of Inspection/Genre d'inspection L-10186 Complaint
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Licensee/Titulaire Rivera Long Term Care Inc., 55 Standish Court, 8 th Floor, Mississauga, ON L5R 4B2
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Long-Term Care Home/Foyer de soins de longue durée Versa Care Maple View, 1029--4 th Avenue West, Owen Sound, ON N4K 4W1

Name of Inspector(s)/Nom de l'inspecteur(s) Elizabeth Elvidge, Sharon Perry

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection. During the course of the inspection, the inspector(s) spoke with: Administrator, Director of Care, Activation Coordinator, Charge Nurses, MDS-RAI Coordinator, Dietary staff, PSWs, Office Manager, and Residents. A review of Resident records was completed. During the course of the inspection, the inspector(s): reviewed Resident records and observed morning and afternoon nourishment pass and lunch. The following Inspection Protocols were used during this inspection: - Dining Observation - Snack Observation - Accommodation Services-Housekeeping - Safe and Secure Home - Dignity, Choice and Privacy - Recreation and Social Activities ☒ Findings of Non-Compliance were found during this inspection. The following action was taken: 3 WN 3 VPC
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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, 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. Current plan of care for a resident was to have weekly 1:1 visits under the rec/leisure program however for the period of July 1 to 21, 2010 this resident had one active participation and one passive participation documented in program attendance sheet.
2. 25 out of 29 residents had program attendance sheets. 4 Residents had no program attendance documented from July 1 to 21, 2010.
3. From July 1 to 21, 2010 out of the 25 attendance sheets activities ranged from 1 to 8 activities for this period (documentation indicates that no resident took part in any form of activity more than 8 times).
4. Attendance for any programs was not recorded for July 8th to July 21, 2010.
5. During the time the inspectors were in the home there were no programs taking place.

Inspector ID #: 121 & 155

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 be implemented voluntarily.

WN #2: The Licensee has failed to comply with O. Reg. 79/10,s.33(1)

The licensee of a long-term care home shall ensure that each resident of the home is bathed, at a minimum, twice a week by the method of his or her choice and more frequently as determined by the resident's hygiene requirements, unless contraindicated by a medical condition.

Findings:

1. During the period of July 8-21, 2010--8 out of 29 residents did not receive 2 baths per week as per their individualized plan of care.

Inspector ID #: 121 & 155



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 be implemented voluntarily.

WN #3: The Licensee has failed to comply with O. Reg. 79/10, s.73(2)(b)

The licensee shall ensure that, no resident who requires assistance with eating or drinking is served a meal until someone is available to provide the assistance required by the resident.

Findings:

1. Three residents were all served their soup without any staff present to provide assistance.

Inspector ID #: 121 & 155

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 [identify what the written plan must cover to achieve compliance], 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.

Title:

Date:

Date of Report: (If different from date(s) of inspection).
October 1, 2010