Ministry of Health and Long-Term Care

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch
Ottawa Service Area Office

347 Preston St., 4th Floor
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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
Bureau régional de services de Ottawa

347, rue Preston, 4iém étage
Ottawa ON K1S 3J4
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November 2, 2010

Mrs. Mary Lynn Lester
Administrator
West Lake Terrance
1673 County Road 12
R,R, #1
Picton ON K0K 2T0

Dear Ms. Lester:

Please find enclosed the ***Inspection Report-Public Copy*** for an inspection conducted on August 11 to 18, 2010 under the *Long-Term Care Homes Act, 2007* (LTCHA) for the purpose of ensuring compliance with requirements under the LTCHA.

This inspection report must be posted in the home, in a conspicuous and easily accessible location in accordance with the LTCHA, 2007, S.O. 2007, c.8, s.79 (1) and (2).

A copy of the ***Inspection Report-Public Copy*** must be made available without charge upon request. The report will also be on file with the Ottawa Service Area Office, Performance Improvement and Compliance Branch.

Sincerely,

Kathleen Smith

Lynda Hamilton
LTC Home Inspector – Nursing

c President, Resident's Council
President, Family Council

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*

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

Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
August 16-18, 2010	2010_124_997_16Aug065308	Complaint-Log # 0894

Licensee/Titulaire
Omni Health Care Limited Partnership on behalf of 0760444 B.C. Ltd. as General Partner
1840 Lansdowne Street West, Unit 12, Peterborough, ON K9K 2M9
Fax: 705-742-9197

Long-Term Care Home/Foyer de soins de longue durée
West Lake Terrace, 1673 County Road 12, R.R.#1, Picton, ON K0K 2T0
Fax: 613-393-2057

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

Lynda Hamilton (124)

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection regarding resident rights, continence care and skin and wound care.

During the course of the inspection, the inspector spoke with Mary Lynn Lester (Administrator/Director of Care), two registered nurses, one registered practical nurse, two personal support workers and the resident.

During the course of the inspection, the inspector completed a walking tour of the home on August 16 & 17, 2010 and observed the care delivered during the lunch meal on Aug. 16, 2010. The resident's health record was reviewed and the home's policy and procedure related to skin and wound care was reviewed.

The following Inspection Protocols were used during this inspection:
Prevention of Abuse, Neglect and Retaliation, Continence Care and Bowel Management and Skin and Wound Care.

☐ There are no findings of Non-Compliance as a result of this inspection.

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

2 WN
1 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 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:

1. The resident was admitted to the home with skin breakdown.
2. The resident's plan of care stated that the area of skin breakdown was to be assessed weekly and as needed with each dressing change.
3. For the period of June22-August 5, 2010 there were no weekly wound assessments.
4. The resident and two personal support workers reported that the resident had pain during morning care.
5. The resident's plan of care stated to administer analgesics prior to exercise or activity.
6. From August 1-17, 2010, the resident did not receive analgesic prior to morning care 7/17 times. This did not meet the care plan expectation of analgesic before exercise or activity.

Inspector ID #:	124

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 meeting the requirement that this resident receives care as specified in his/her plan of care, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with LTCHA, 2007, S.O. 2007 c.8, s.3(1) Every resident has the right to be treated with courtesy and respect and in a way that fully recognizes the resident's individuality and respects the resident's dignity.

Findings:

1. The resident reported to the inspector that he/she was told by the staff that he/she could not wear underwear but his/her preference was to wear underwear.
2. The resident reported that he/she was uncomfortable while sitting in his/her wheelchair without

underwear.

3. Three personal support workers reported that the resident did not wear a brief or underwear but was covered with a lap blanket when sitting up in his/her wheelchair.
4. Not respecting the resident's preference and leaving the resident unclothed did not recognize his/her individuality or respect his/her dignity.
5. During a telephone conversation of October 20, 2010, Mary Lynn Lester, the Administrator reported that the resident has been wearing underwear/brief since August 19, 2010. Staff was redirected on August 18, 2010.

Inspector ID #:	124

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.** Lynda Hamilton
Title: **Date:**	**Date of Report:** (if different from date(s) of inspection). Oct. 20, 2010