

de longue durée

**Inspection Report under** the Long-Term Care Homes Act, 2007

Rapport d'inspection prévue sous la Loi de 2007 sur les foyers de soins de longue durée

Ministère de la Santé et des Soins

Long-Term Care Homes Division **Long-Term Care Inspections Branch** 

Division des foyers de soins de longue durée Inspection de soins de longue durée

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# Public Copy/Copie du public

Report Date(s) /

Inspection No / Date(s) du Rapport No de l'inspection Log #/ No de registre

Type of Inspection / **Genre d'inspection** 

Jan 31, 2019

2019 727695 0003 027189-18

Complaint

#### Licensee/Titulaire de permis

peopleCare Not-For-Profit Homes Inc. 735 Bridge Street West WATERLOO ON N2V 2H1

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

peopleCare A.R. Goudie Kitchener 369 Frederick Street KITCHENER ON N2H 2P1

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

FARAH\_ KHAN (695)

## Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): This inspection was conducted on the following date(s): January 24 and 25 of 2019.

During the course of the inspection, the following complaint was inspected: log #027189-18, related to a fall with injury.

During the course of the inspection the inspector observed the provision of care and services, reviewed relevant documents including but not limited to: clinical records, policies and procedures, and training records.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Nurse (DOC), Director of Resident Care (DORC), Social Worker (SW), Registered Nurse (RN), Registered Practical Nurse (RPN), and Personal Support Workers (PSWs).

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

During the course of this inspection, Non-Compliances were issued.

- 1 WN(s)
- 1 VPC(s)
- 0 CO(s)
- 0 DR(s)
- 0 WAO(s)



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NON-COMPLIANCE / NON - RESPECT DES EXIGENCES				
Legend	Légende			
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités			
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 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.			
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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. 50. Skin and wound care



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#### Specifically failed to comply with the following:

- s. 50. (2) Every licensee of a long-term care home shall ensure that,
- (b) a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds,
- (i) receives a skin assessment by a member of the registered nursing staff, using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment,
- (ii) receives immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required,
- (iii) is assessed by a registered dietitian who is a member of the staff of the home, and any changes made to the resident's plan of care relating to nutrition and hydration are implemented, and
- (iv) is reassessed at least weekly by a member of the registered nursing staff, if clinically indicated; O. Reg. 79/10, s. 50 (2).

### Findings/Faits saillants:



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1. The licensee has failed to ensure that the resident who exhibited altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, received a skin assessment by a member of the registered nursing staff, using a clinically appropriate assessment instrument that was specifically designed for skin and wound assessment.

A complaint was submitted to the Ministry of Health and Long-Term Care (MOHLTC) regarding a fall, which resulted in resident #001 having altered skin integrity.

A record review conducted found a progress note regarding the resident's altered skin integrity after the fall. A clinically appropriate skin assessment could not be found in the record review.

Personal Support Worker (PSW) #108 and Registered Nurse (RN) #102 recalled that resident #001 had altered skin integrity after the fall.

The Director of Resident Care (DORC) confirmed that a clinically appropriate assessment tool was not completed for resident #001's area of altered skin integrity.

The licensee has failed to ensure that when resident #001 exhibited altered skin integrity that a skin assessment was completed by a member of the registered nursing staff using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment. [s. 50. (2) (b) (i)]

# 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 the resident who exhibits altered skin integrity, receives a skin assessment by a member of the registered nursing staff, using a clinically appropriate assessment instrument that was specifically designed for skin and wound assessment, to be implemented voluntarily.



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Issued on this 31st day of January, 2019

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

Original report signed by the inspector.