



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

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

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

Health System Accountability and Performance Division  
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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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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
May 27, 2013	2013_228172_0007	L-000313-13	Complaint

**Licensee/Titulaire de permis**

S & R NURSING HOMES LTD.  
265 NORTH FRONT STREET, SUITE 200, SARNIA, ON, N7T-7X1

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

AFTON PARK PLACE LONG TERM CARE COMMUNITY  
1200 AFTON DRIVE, SARNIA, ON, N7S-6L6

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

JOAN WOODLEY (172)

**Inspection Summary/Résumé de l'inspection**

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

This inspection was conducted on the following date(s): May 24, 2013

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, 1 Registered Practical Nurse, 1 Life Enrichment Worker, and 3 Residents.

During the course of the inspection, the inspector(s) observed resident care, activities in the home, meal service, reviewed health care records and policies.

The following Inspection Protocols were used during this inspection:

Nutrition and Hydration

Pain



**Recreation and Social Activities**

**Responsive Behaviours**

**Findings of Non-Compliance were found during this inspection.**

<b>NON-COMPLIANCE / NON - RESPECT DES EXIGENCES</b>	
<p><b>Legend</b></p> <p>WN – Written Notification            VPC – Voluntary Plan of Correction            DR – Director Referral            CO – Compliance Order            WAO – Work and Activity Order</p>	<p><b>Legendé</b></p> <p>WN – Avis écrit            VPC – Plan de redressement volontaire            DR – Aiguillage au directeur            CO – Ordre de conformité            WAO – Ordres : travaux et activités</p>
<p>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.)</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care**



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

**s. 6. (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,**  
**(a) the planned care for the resident; 2007, c. 8, s. 6 (1).**  
**(b) the goals the care is intended to achieve; and 2007, c. 8, s. 6 (1).**  
**(c) clear directions to staff and others who provide direct care to the resident. 2007, c. 8, s. 6 (1).**

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**Findings/Faits saillants :**

1. The Licensee has failed to ensure the plan of care set out gives clear direction to staff and other who provide care to a resident.

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A Care plan that was reviewed referenced specific medications as interventions for a resident which according to the physician's orders had been discontinued.

Staff interview with a member of the registered staff confirmed these medications are not currently prescribed for this resident according to the Electronic Medication Record.

2. Behaviours identified in a resident's chart were not identified on a resident's care plan with subsequent, appropriate interventions to address these behaviours.

This was verified by the Director of Care. [s. 6. (1) (c)]

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Issued on this 27th day of May, 2013

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

Joan L. Woodley, RN.