



**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

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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

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
April 19, 2011	2011_167_8501_19Apr100845	Inspection related to complaint H-00166

Licensee/Titulaire
Albright Gardens Homes Inc.
5050 Hillside drive,
Beamsville, Ontario
L0R 1B2

Long-Term Care Home/Foyer de soins de longue durée
Albright Manor
5050 Hillside drive,
Beamsville, Ontario
L0R1B2

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

Marilyn Tone # 167

Inspection Summary/Sommaire d'inspection

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

During the course of the inspection, the inspector spoke with: The Director of Care, the Manager of Programming and Support Services, recreation staff and personal support worker staff.

During the course of the inspection, the inspector: conducted a review of the health file for the identified resident, observed care on the home area where the identified resident resides and reviewed the home's policy related to Continance Care.

The following Inspection Protocols were used during this inspection:
Continance Care and Bowel Management Inspection Potocol
Recreation and Social programming Inspection Protocol

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

3 WN

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

Findings:

The plan of care for the identified resident did not give clear direction to staff providing care.

- 1) The progress notes for the identified resident indicated that their family had made a number of requests related to the care of the resident. The home did not include these interventions in the document that the home refers to as the care plan.
- 2) The document that the home refers to as the care plan does not provide direction to staff related to the programming requirements for the resident.
- 3) The identified resident's plan of care does not include direction to staff related to the resident's toileting needs.

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WN #2: The Licensee has failed to comply with O. Reg. 79/10, s.26 (3)16, 22

A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident:

- 16) Activity patterns and pursuits.
- 22) Cultural, spiritual and religious preferences and age-related needs and preferences.

Findings:

The identified resident's plan of care was not based on an interdisciplinary assessment of their needs with respect to the following:

- 1) There was no interdisciplinary assessment completed to address the identified resident's activity needs.
- 2) The plan of care for the identified resident does not include an assessment of or interventions in place



to address their spiritual, cultural or religious needs.

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WN #3: The Licensee has failed to comply with O. Reg. 79/10, s.51(2)(b)

Every licensee of a long-term care home shall ensure that, each resident who is incontinent has an individualized plan, as part of his or her plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented;

Findings:

The identified resident does not have a plan of care in place to address their bladder continence needs. No reassessment of their continence needs was completed and no plan of care was developed to address their individual assessed needs.

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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).

May 5, 2011