



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

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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
Jan 11, 2013	2013_049143_0004	O-002330- 12/O- 002348-12	Complaint

**Licensee/Titulaire de permis**

CHARTWELL MASTER CARE LP  
100 Milverton Drive, Suite 700, MISSISSAUGA, ON, L5R-4H1

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

BALLYCLIFFE LODGE NURSING HOME  
70 STATION STREET, AJAX, ON, L1S-1R9

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

PAUL MILLER (143)

**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): January 8-10th, 2012**

**During the course of the inspection, the inspector(s) spoke with The Administrator, the Acting Director of Nursing and the attending physician.**

**During the course of the inspection, the inspector(s) Observed resident care and services, reviewed resident health care records inclusive of plan of care, daily flow sheets, food and fluid intake records, physician assessments, progress notes, hospital discharge records and policies and procedures.**

**The following Inspection Protocols were used during this inspection:  
Contenance Care and Bowel Management**

**Infection Prevention and Control**

**Nutrition and Hydration**

**Skin and Wound Care**

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

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**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

<b>Legend</b>	<b>Legendé</b>
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	WAO – Ordres : travaux et activités



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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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 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.

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. 8. Policies, etc., to be followed, and records**

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

**s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,**  
**(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).**  
**(b) is complied with. O. Reg. 79/10, s. 8 (1).**

**Findings/Faits saillants :**



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The following findings are related to log O-002330-12:

1. The following findings indicate that the licensee did not comply with r. 8(1)(b) in that they did not ensure that their system to monitor food and fluid intake of residents was complied with.

O. Reg 79/10, s. 68(1)(d) states that the licensee shall ensure that the nutrition and hydration program includes a system to monitor and evaluate the food and fluid intake of residents with identified risks.

The home's system to monitor food and fluid intake for residents identifies within policy No. NHS-X-16, Daily Food and Fluid Intake Record that PSW/HCA after each meal and snack time shall complete a daily recording of food and fluid. A review of resident # 1 plan of care identified that they were at moderate nutritional risk. A review of resident # 1 daily food and fluid intake record for a specified period indicated that am, pm, HS and special snacks were not documented and fluids were not documented sixteen times of the two hundred and seven required recordings.

The licensee has failed to comply with r. 8(1)(b) in that they did not ensure that their system to monitor food and fluid intake of residents was complied with. [s. 8. (1)]

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Issued on this 11th day of January, 2013

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