



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

**Rapport d'inspection
prévus 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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**Ministère de la Santé et des Soins de
longue durée**

Division de la responsabilisation et de la performance du
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Date(s) of inspection/Date de l'inspection May 12, 2011	Inspection No/ d'inspection 2011_121_12May203029	Type of Inspection/Genre d'inspection Complaint L-000608
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Licensee/Titulaire
Corporation of the County of Bruce, 41 McGivern St., P.O. Box 1600, Walkerton, ON N0G 2V0

Long-Term Care Home/Foyer de soins de longue durée
Brucelea Haven, 41 McGivern St., P.O. Box 1600, Walkerton, ON N0G 2V0

Name of Inspector(s)/Nom de l'inspecteur(s)
Elizabeth Elvidge #121

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection relating to responsive behaviours.

During the course of the inspection, the inspector spoke with the Director of Care, the Housekeeping Manager, 1 Registered Nurse, 2 Registered Practical Nurses, 2 PSWs and 1 Nursing student.

During the course of the inspection, the inspector observed the residents in the Special Care Unit, reviewed the housekeeping schedules, reviewed the policy on Abuse/Neglect, reviewed the chart and the care plans of residents.

The following Inspection Protocols were used in part or in whole during this inspection:

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

2 WN
2 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, s6(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,
(c) clear directions to staff and others who provide direct care to the resident.**

Findings:

The following entries on the plan of care for the identified resident lack clarity;
Mentions self-directed activities but not what they are.
No rec/leisure involvement on the afternoon shift or listed activities that would indicate a multi-disciplinary approach to the wandering.
Mentions walks but no indication of who is going to do this, no frequency and no times.
Mentions the outdoor secure area but no indication of who will take the resident out, frequency and times.
Mentions to provide diversional activities but not what these specific activities are that will decrease the behaviour.
Says to give the resident a task or item to divert or break repetitive cycle but not what specific tasks or items, who is to provide and when.
Says to re-direct the resident but no specific destinations to direct the resident to prevent wandering.
Does not indicate who is monitoring the resident for safety and the safety of other residents when staff are providing care to residents.
No infection control/sanitation measures considering the identified unsociable behaviour related to hygiene in relation to touching and moving personal items in other residents' rooms.
No identified interventions to prevent handling the dishes and cutlery on the tables when set for the next meal.

Inspector ID #: 121

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 provide interventions in the plan of care that will protect the rights of the other residents, to be implemented voluntarily.

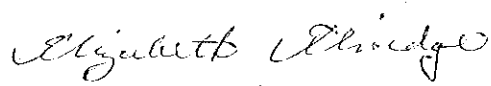


WN #2: The Licensee has failed to comply with O.Reg. 79/10, s.53(1)4
Every licensee of a long-term care home shall ensure that the following are developed to meet the needs of residents with responsive behaviours:
4. Protocols for the referral of residents to specialized resources where required.

Findings:
No evidence on the chart that the identified resident has been referred to specialized resources.

Inspector ID #: 121

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 access specialized resources to assist with the management of responsive behaviours, to be implemented voluntarily.

<p>Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné</p>	<p>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.</p> 
<p>Title: _____ Date: _____</p>	<p>Date of Report: May 31, 2011</p>