



**Ministry of Health and
Long-Term Care**

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

**Ministère de la Santé et des
Soins de longue durée**

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

**Health System Accountability and
Performance Division
Performance Improvement and
Compliance Branch**

**Division de la responsabilisation et de la
performance du système de santé
Direction de l'amélioration de la
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Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Nov 10, 2015	2015_263524_0034	014031-15	Complaint

Licensee/Titulaire de permis

CARESSANT-CARE NURSING AND RETIREMENT HOMES LIMITED
264 NORWICH AVENUE WOODSTOCK ON N4S 3V9

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

CARESSANT CARE LISTOWEL NURSING HOME
710 RESERVE AVENUE SOUTH LISTOWEL ON N4W 2L1

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

INA REYNOLDS (524)

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): October 28, 2015.

This complaint inspection is related to nutrition and hydration and falls prevention.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, the Nutritional Manager and a Personal Support Worker.

The inspector also observed the lunch meal service, resident and staff interactions and reviewed a clinical record including assessments and care planning interventions, multidisciplinary conference notes and progress records related to this inspection.

The following Inspection Protocols were used during this inspection:

Falls Prevention

Nutrition and Hydration

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)



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
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. 26. Plan of care



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Specifically failed to comply with the following:

s. 26. (3) A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident:

5. Mood and behaviour patterns, including wandering, any identified responsive behaviours, any potential behavioural triggers and variations in resident functioning at different times of the day. O. Reg. 79/10, s. 26 (3).

s. 26. (3) A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident:

21. Sleep patterns and preferences. O. Reg. 79/10, s. 26 (3).

Findings/Faits saillants :



1. The licensee had failed to ensure that the plan of care was based on an interdisciplinary assessment of the mood and behaviour patterns, including wandering, any identified responsive behaviours and variations in resident functioning at different times of the day.

Record review of the MDS Minimum Data Set assessment under the behaviour section revealed an identified resident had behaviours and was resistive to care. A Personal Support worker confirmed the resident had numerous identified responsive behaviours patterns and that the responsive behaviours were usually ongoing during a specific time of day and throughout the home.

Record review of the plan of care, revealed the resident did not have a plan of care that addressed responsive behaviours with goals and interventions.

Staff interview on October 28, 2015, with the Director of Care confirmed the absence of responsive behaviour patterns with related goals and interventions in the resident's plan of care and that it is the home's expectation that there should be. [s. 26. (3) 5.]

2. The licensee had failed to ensure that the plan of care was based on, at a minimum, an interdisciplinary assessment with respect to the resident sleep patterns and preferences.

Record review of the MDS Minimum Data Set assessment under the mood and behaviour section for an identified resident indicated the resident had insomnia/change in usual sleep pattern exhibited up to 5 days a week and was not easily altered. Record review of the plan of care for the resident revealed there was no focus statement, goals or interventions related to the resident's sleep patterns and preferences based on the assessment.

Review of progress notes and interview with a Personal Support Worker on October 28, 2015, confirmed the resident had sleep issues and specific preferences.

Interview with the Director of Care confirmed the absence of sleep patterns and preferences in the resident's plan of care. [s. 26. (3) 21.]



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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 plan of care is based on an interdisciplinary assessment of the mood and behaviour patterns, including wandering, any identified responsive behaviours and variations in resident functioning at different times of the day and with respect to the resident sleep patterns and preferences, to be implemented voluntarily.

Issued on this 16th day of November, 2015

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

Original report signed by the inspector.