



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

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

**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
performance et de la conformité**

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**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**

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Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Oct 28, 29, 2014	2014_303563_0044	005193-14	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 WOODSTOCK NURSING HOME
81 FYFE AVENUE, WOODSTOCK, ON, N4S-8Y2

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

MELANIE NORTHEY (563)

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): October 16, 2014

During the course of the inspection, the inspector(s) spoke with the Director of Nursing, Assistant Director of Care, one Personal Support Worker, and one Family member.

During the course of the inspection, the inspector(s) made observations, reviewed health records, appropriate policies and other relevant documentation.

The following Inspection Protocols were used during this inspection:
Personal Support Services
Reporting and Complaints



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Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	Legendé 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. 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).



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Findings/Faits saillants :

1. The licensee has failed to ensure that the procedure to check residents clothing for personal items prior to sending to laundry is complied with.

Family interview [REDACTED] revealed the resident's personal property went through the washing machine and was returned damaged and required replacement.

Record review of the progress notes revealed the resident's personal property had been found damaged.

Staff interview with Personal Support Worker (PSW) revealed it is the responsibility of the PSWs to check all items of clothing prior to them being sent to laundry; looking for hearing aids, glasses, dentures, jewelery and even kleenex. A PSW confirmed that management instructed PSWs to check resident clothing before going to laundry to ensure personal property is not lost or damaged.

Staff interview with the Assistant Director of Nursing (ADON) revealed staff are instructed to check all articles of clothing before placing them in the bin for laundry and staff are to ensure glasses, dentures and hearing aids are accounted for at the end of each day. This instruction is provided at orientation and as ongoing education. The ADON shared that the laundry aides are also instructed to shake out clothing prior to cleaning.

The Director of Nursing confirmed it is the home's expectation that PSW staff on the floor check all resident clothing for personal items like dentures, glasses and hearing aids prior to being sent for laundry to ensure personal property is not lost or damaged. [s. 8. (1) (b)]



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Issued on this 29th day of October, 2014

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