



**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
prévus le Loi de 2007 les
foyers de soins de longue**

**Health System Accountability and Performance
Division
Performance Improvement and Compliance Branch**
**Division de la responsabilisation et de la
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Feb 27, 28, Mar 1, 2, Apr 24, 25, 26, 27, 2012	2012_031194_0011	Complaint

Licensee/Titulaire de permis

CENTENNIAL PLACE MILLBROOK INC.
307 Aylmer Street, PETERBOROUGH, ON, K9L-7M4

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

CENTENNIAL PLACE LONG-TERM CARE HOME
2 Centennial Lane North, MILLBROOK, ON, M5J-2G2

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

CHANTAL LAFRENIERE (194)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care (DOC), Registered Nurse (RN), Registered Practical Nurse (RPN), Personal Support Worker (PSW), Physio Therapist (PT), RAI CO-Ordinator and residents

During the course of the inspection, the inspector(s) Observed residents, reviewed resident clinical health records, Critical Incident Reports, relevant policies and Fall prevention program.

The following Inspection Protocols were used during this inspection:

Falls Prevention

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. 30. General requirements

Specifically failed to comply with the following subsections:

s. 30. (1) Every licensee of a long-term care home shall ensure that the following is complied with in respect of each of the organized programs required under sections 8 to 16 of the Act and each of the interdisciplinary programs required under section 48 of this Regulation:

- 1. There must be a written description of the program that includes its goals and objectives and relevant policies, procedures and protocols and provides for methods to reduce risk and monitor outcomes, including protocols for the referral of residents to specialized resources where required.**
- 2. Where, under the program, staff use any equipment, supplies, devices, assistive aids or positioning aids with respect to a resident, the equipment, supplies, devices or aids are appropriate for the resident based on the resident's condition.**
- 3. The program must be evaluated and updated at least annually in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices.**
- 4. The licensee shall keep a written record relating to each evaluation under paragraph 3 that includes the date of the evaluation, the names of the persons who participated in the evaluation, a summary of the changes made and the date that those changes were implemented. O. Reg. 79/10, s. 30 (1).**

Findings/Faits saillants :

1. As required by O.Reg 79/10 s.30.(1)1 the licensee shall ensure that the Falls Prevention and Management program has written description of the program that includes its goals, objectives, relevant policies and that they are complied with.

The licensee's "Falls Risk Assessment and interventions Policy" RS-I-22 dated December 2011 indicates that a falls assessment is to be completed, identifying a level of risk in Point Click Care if the MDS assessment triggers a Falls RAP.

It was noted that the following three incidents did not have an assessment identifying a level of risk in Point Click Care where a fall RAP was triggered in MDS.

2. Resident #003 had a fall in August, 2011 resulting in a fracture. A RAI MDS Admission was completed in May 2011 with a fall RAP being triggered and a RAI MDS quarterly review was completed on September, 2011 with a fall RAP being triggered.

-No falls assessments identifying a level of risk in Point Click Care, after a fall RAP in MDS was triggered was completed in May or September 2011 for resident #003.

3. Resident #002 sustained a fracture, post fall in July, 2011. A RAI-MDS Admission assessment was completed in June 2011, with a fall RAP being triggered, a RAI-MDS significant change in status was completed in August 2011, with a fall RAP being triggered.

-No falls assessments identifying a level of risk in Point Click Care, after a fall RAP was triggered was completed for June or August 2011 for resident #002.

4. Resident #001 sustained a fall on November 2011. A RAI MDS significant change in condition was completed in December 2011 and a RAP for falls was triggered with no assessments identifying the level of risk in Point Click Care was completed.

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 by ensuring that a falls assessment identifying a level of risk in Point Click Care is completed, when a fall RAP is triggered in MDS, to be implemented voluntarily.

Issued on this 30th day of April, 2012

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