

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

Long-Term Care Homes Division Long-Term Care Inspections Branch

Division des foyers de soins de longue durée Inspection de soins de longue durée Central East Service Area Office 419 King Street West Suite #303 OSHAWA ON L1J 2K5 Telephone: (905) 433-3013 Facsimile: (905) 433-3008 Bureau régional de services du Centre-Est 419 rue King Ouest bureau 303 OSHAWA ON L1J 2K5 Téléphone: (905) 433-3013 Télécopieur: (905) 433-3008

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Report Date(s) /	Inspection No /	Log # /	Type of Inspection /
Date(s) du apport	No de l'inspection	No de registre	Genre d'inspection
May 29, 2018	2018_694166_0010	008088-18	Resident Quality Inspection

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

CAROLINE TOMPKINS (166), CHANTAL LAFRENIERE (194)

Inspection Summary/Résumé de l'inspection



Ontario

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The purpose of this inspection was to conduct a Resident Quality Inspection.

This inspection was conducted on the following date(s): May 16, 17, 22, 23, 24, 25, 2018

During the course of the inspection, the inspector(s) spoke with Residents, Family members, a representative of the Residents' Council, Resident Assessment Instrument Coordinator(RAI), Personal Support Workers(PSW), Registered Practical Nurses(RPN), Registered Nurses(RN), Physiotherapist(PT), Director of Dietary Services(DDS), Restorative Care Aide, Registered Dietitian(RD), Director of Resident and Family Services, the Assistant Director of Care(ADOC), the Director of Care(DOC) and the Administrator.

During the course of this inspection the Inspectors toured resident home and common areas, observed staff to resident interactions during the provision of care, resident to resident interactions, reviewed relevant clinical documentation and observed infection control practices and the administration of medication.

The following Inspection Protocols were used during this inspection: Dignity, Choice and Privacy Falls Prevention Family Council Infection Prevention and Control Medication Nutrition and Hydration Residents' Council Skin and Wound Care

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)



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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. 50. Skin and wound care



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Specifically failed to comply with the following:

s. 50. (2) Every licensee of a long-term care home shall ensure that, (b) a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds,

(i) receives a skin assessment by a member of the registered nursing staff, using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment,

(ii) receives immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required,

(iii) is assessed by a registered dietitian who is a member of the staff of the home, and any changes made to the resident's plan of care relating to nutrition and hydration are implemented, and

(iv) is reassessed at least weekly by a member of the registered nursing staff, if clinically indicated; O. Reg. 79/10, s. 50 (2).

Findings/Faits saillants :





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1. The licensee failed to ensure that residents exhibiting pressure ulcers were assessed by a Registered Dietitian(RD) who is a member of the staff of the home, and any changes made to the residents plan of care relating to nutrition and hydration are implemented.

During stage two of this inspection, the Inspectors reviewed the previous and most recent Material Data Set (MDS) assessments for residents #003and #005. Both residents were identified as having impaired skin integrity.

Review of the clinical documentation for both resident #003 and resident #005 did not provide any indication that the Registered Dietitian had assessed either resident specifically related to impaired skin integrity.

During a telephone interview with Inspector #194, the RD indicated that on going assessments of resident #005 and #003 had been completed but the RD had not specifically identified the residents' skin conditions in the documentation.

The licensee failed to ensure that resident #005 and #003 exhibiting impaired skin integrity were assessed by a Registered Dietitian who is a member of the staff of the home, and any changes made to the residents plan of care relating to nutrition and hydration are implemented. [s. 50. (2) (b) (iii)]

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 residents exhibiting pressure ulcers are assessed by a Registered Dietitian who is a member of the staff of the home, and any changes made to the residents plan of care relating to nutrition and hydration are implemented, to be implemented voluntarily.



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Issued on this 7th day of June, 2018

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

Original report signed by the inspector.