



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 prévue 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 performance du système de santé
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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Jun 14, 15, 18, 19, Aug 17, Sep 7, 2012; 2012_027192_0032; Follow up

Licensee/Titulaire de permis

DELHI NURSING HOME LTD
750 GIBRALTAR STREET, DELHI, ON, N4B-3B3

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

DELHI LONG TERM CARE CENTRE
750 GIBRALTAR STREET, DELHI, ON, N4B-3B3

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

DEBORA SAVILLE (192)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, Assistant Director of Care, Registered Nurses, Registered Practical Nurses, Personal Support Workers, the Director of Policy and Legislation and residents related to H-001134-12.

During the course of the inspection, the inspector(s) reviewed medical records, policy and procedure, training records, and high risk monitoring tools.

The following Inspection Protocols were used during this inspection:

Minimizing of Restraining

Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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.)</p>	<p>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.</p>
<p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care Specifically failed to comply with the following subsections:

s. 6. (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan. 2007, c. 8, s. 6 (7).

Findings/Faits saillants :

1. The licensee failed to ensure that care set out in the plan of care is provided to the resident as specified in the plan. [s. 6. (7)]
 - a) Resident 003's plan of care indicates that they are to use one bed rail to assist with bed mobility.
 - b) Resident 003 was observed to be laying on a therapeutic surface with two bed rails in place in 2012.
 - c) Staff interviewed believe that resident 003 is safer with two bed rails when in bed and consistently raise both rails.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 134. Residents' drug regimes Every licensee of a long-term care home shall ensure that,

- (a) when a resident is taking any drug or combination of drugs, including psychotropic drugs, there is monitoring and documentation of the resident's response and the effectiveness of the drugs appropriate to the risk level of the drugs;
- (b) appropriate actions are taken in response to any medication incident involving a resident and any adverse drug reaction to a drug or combination of drugs, including psychotropic drugs; and
- (c) there is, at least quarterly, a documented reassessment of each resident's drug regime. O. Reg. 79/10, s. 134.

Findings/Faits saillants :

1. The licensee failed to ensure that there is, at least quarterly, a documented reassessment of each resident's drug regime. [O. Reg. 79/10, s. 134 (c)]

a) Resident 006 had a Three Month Review (TMR) of their medication as prescribed by the physician completed for designated periods in 2011. The next TMR review completed signed by the physician in 2012, 2 months after the end of the identified three month period. No review was completed to cover the period between September and November 2011 and there is no TMR on the medical record for the past four months.

c) Resident 003 has not had a three month medication review completed since September 2011 as confirmed by documentation review and interview.

d) Resident 007 had a no TMR completed for a six month period in 2012.

d) Interview confirms that three month medication reviews have not consistently been completed for residents of the home. The home is responsible to print the three month medication review and process the review according to the policy. This has not consistently been completed and not always before the end of the period of the medication review.

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 ensuring that there is at least quarterly, a documented reassessment of each resident's drug regime, to be implemented voluntarily.

**THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/
LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT
CONFORME AUX EXIGENCES:**

CORRECTED NON-COMPLIANCE/ORDER(S) REDRESSEMENT EN CAS DE NON-RESPECT OU LES ORDERS:			
REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / NO DE L'INSPECTION	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 r. 15.	CO #001	2011_066107_0003	192
O.Reg 79/10 r. 110.	CO #002	2011_066107_0003	192

Issued on this 12th day of September, 2012

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

