

**Inspection Report under
the Long-Term Care
Homes Act, 2007****Rapport d'inspection en vertu de
la Loi de 2007 sur les foyers de
soins de longue durée****Long-Term Care Operations Division
Long-Term Care Inspections Branch****Division des opérations relatives aux
soins de longue durée
Inspection de soins de longue durée**Central West Service Area Office
1st Floor, 609 Kumpf Drive
WATERLOO ON N2V 1K8
Telephone: (888) 432-7901
Facsimile: (519) 885-2015Bureau régional de services de Centre
Ouest
1e étage, 609 rue Kumpf
WATERLOO ON N2V 1K8
Téléphone: (888) 432-7901
Télécopieur: (519) 885-2015**Public Copy/Copie du rapport public**

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Jan 20, 2020	2020_755728_0001	000310-20	Complaint

Licensee/Titulaire de permisRevera Long Term Care Inc.
5015 Spectrum Way, Suite 600 MISSISSAUGA ON L4W 0E4**Long-Term Care Home/Foyer de soins de longue durée**Forest Heights
60 Westheights Drive KITCHENER ON N2N 2A8**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs**

MARIA MCGILL (728)

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): January 8, 2020 - January 10, 2020.

**The following intakes were completed in this Complaint Inspection:
Log #000310-20, related to nutrition and hydration, bathing, and notification of
substitute decision maker.**

**During the course of the inspection, the inspector(s) spoke with the Executive
Director, the Director of Care, the Resident Care Manager, the Registered Dietitian,
Registered Nurses (RN), Registered Practical Nurses (RPN), and Personal Support
Workers (PSW).**

**The inspector reviewed clinical records and plans of care for relevant residents
and pertinent policies and procedures.**

**Observations were made of residents, staff to resident interactions, and dining and
snack services.**

**The following Inspection Protocols were used during this inspection:
Hospitalization and Change in Condition
Nutrition and Hydration
Personal Support Services**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

0 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

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>Légende</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>The following constitutes written notification of non-compliance under paragraph 1 of section 152 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>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 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).

Findings/Faits saillants :

The licensee has failed to ensure that where the Act and Regulation required the licensee of a long-term care home to have, institute, or otherwise put in place any policy, the policy was complied.

In accordance with the LTCHA, s. 11 (1) (a) and in reference to O. Reg. s. 68 (1) (b), the licensee was required to have an organized program of nutrition care and dietary services that included identification of any risks related to nutrition care, dietary services, and hydration.

Specifically, the staff did not comply with the licensee's "LTC – Food and Fluid Intake Monitoring" policy (reviewed March 31, 2019), which was part of the licensee's Nutrition Care and Hydration program and required staff to send a referral to the Registered Dietitian when a resident's intake changed from their usual.

Resident #001's intake on admission was documented to be a specified amount. Registered Dietitian #108 completed the resident's nutrition assessment on an identified date, that documented their intake and implemented nutrition related interventions.

Registered staff and personal support workers #103, #104, #105, #106, and #107 said that resident's intake changed over an identified time period. There was no referral to the registered dietitian completed when their intake changed.

Registered Dietitian #107 said that a referral should have been completed when resident #001's intake changed.

The licensee failed to ensure that the home's policy, LTC Food and Fluid Intake Monitoring, was complied by staff, when a referral for resident #001 was not sent to the Registered Dietitian when their usual intake changed. [s. 8. (1) (a),s. 8. (1) (b)]

Issued on this 20th day of January, 2020

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

Original report signed by the inspector.