



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
Direction de l'amélioration de la performance et de la conformité

London Service Area Office
291 King Street, 4th Floor
LONDON, ON, N6B-1R8
Telephone: (519) 675-7680
Facsimile: (519) 675-7685

Bureau régional de services de London
291, rue King, 4ième étage
LONDON, ON, N6B-1R8
Téléphone: (519) 675-7680
Télécopieur: (519) 675-7685

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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Jan 31, Feb 1, 2, 3, 6, 14, 2012; 2012\_069170\_0001; Complaint

Licensee/Titulaire de permis

REVERA LONG TERM CARE INC.
55 STANDISH COURT, 8TH FLOOR, MISSISSAUGA, ON, L5R-4B2

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

DIANNE WILBEE (170)

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 Executive Director, ADOC/RAI Coordinator, Wound Care Coordinator, Registered Nurses, Registered Practical Nurses, Personal Support Workers and Residents.

During the course of the inspection, the inspector(s) reviewed policies and procedures related to continence care and wound care, reviewed continence care product distribution, reviewed a Monthly Skin Integrity Report, reviewed Residents' Continence Care list, reviewed Treatment Administration Records, reviewed Turning Log Signature Sheet, reviewed residents' clinical records including plans of care and Head to Toe Assessments, observed residents and observed staff provision of care, conducted resident interviews, and conducted staff interviews.

The following Inspection Protocols were used during this inspection:

Continence Care and Bowel Management

Skin and Wound Care

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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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 LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care**  
**Specifically failed to comply with the following subsections:**

**s. 6. (9) The licensee shall ensure that the following are documented:**

- 1. The provision of the care set out in the plan of care.**
- 2. The outcomes of the care set out in the plan of care.**
- 3. The effectiveness of the plan of care. 2007, c. 8, s. 6 (9).**

**Findings/Faits saillants :**

1. The licensee did not ensure that the provision of the care set out in a resident's plan of care was documented. The home stated a "Turning Log Signature Sheet" is to be completed by staff, every two hours, to record staffs' repositioning of a dependent resident. The January 14 to 31, 2012 turning log, for a resident, was not completed every two hours to indicate the resident had been repositioned.

Issued on this 14th day of February, 2012

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

*Dianne Skelbee #170*