



**Ministry of Health and  
Long-Term Care**

**Ministère de la Santé et des Soins  
de longue durée**

**Inspection Report under  
the Long-Term Care  
Homes Act, 2007**

**Rapport d'inspection prévue  
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**

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## **Public Copy/Copie du public**

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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Dec 28, 2018	2018_683126_0020	016396-18, 016397-18	Follow up

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### **Licensee/Titulaire de permis**

Genesis Gardens Inc.  
1004 Buckskin Way Orleans ON K1C 2Y6

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

Foyer St-Viateur Nursing Home  
1003 Limoges Road South Limoges ON K0A 2M0

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

LINDA HARKINS (126)

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## **Inspection Summary/Résumé de l'inspection**

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

**This inspection was conducted on the following date(s): October 4, 5, 9, 10, 11, 15, 2018**

**During the course of this inspection these follow up to Orders were completed:  
Compliance Order (CO) # 001, log #016397-18, related to duty to protect  
CO #002, log# 016396-18 related to the plan of care (nutritional interventions )**

**During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, the Assistant Director of Care, several Registered Nurses, several Registered Practical Nurses, several Personal Support Workers, the Registered Dietitian, the Food Service Supervisor, the Activity Manager, one Dietary Aid and one Cook.**

**The following Inspection Protocols were used during this inspection:  
Nutrition and Hydration  
Prevention of Abuse, Neglect and Retaliation**

**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)**

**The following previously issued Order(s) were found to be in compliance at the time of this inspection:**

**Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:**



REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
LTCHA, 2007 S.O. 2007, c.8 s. 19. (1)	CO #001	2018_621547_0019		126
LTCHA, 2007 S.O. 2007, c.8 s. 6. (7)	CO #002	2018_621547_0019		126

**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>



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**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 :**



1. The licensee had failed to ensure that any plan, policy, protocol, procedure, strategy or system instituted or otherwise put in place is:

(b) complied with.

In accordance with O. Reg. 79/10, s. 68. (2) Every licensee of a long-term care home shall ensure that the programs include,  
(a) the development and implementation, in consultation with a registered dietitian who is a member of the staff of the home, of policies and procedures relating to nutrition care and dietary services and hydration;

The licensee has a policy and procedures called " Issuing Authority, High risk and specialized interventions" dated October 2018 who require staff to do the following:

"• Both staff member providing the interventions and the nurse in the dining room are to complete the signing section of the form at every meal in the intake binder. The signature confirm that the interventions were provided and documented".

Discussions were held with several Registered Nurses (RNs), with one Registered Practical Nurse, several Personal Support Workers (PSWs) and one Activity Staff who were all aware of the residents that were identified at high nutritional risk. The staff were all aware of the policy to sign the intake binder after each meal.

The intake binder was reviewed by Inspector #126 for the period of two months and the following was noted:

Resident #001's High Risk Intervention Monitoring Tool, it was noted that for the first month, the feeders did not sign for 20/93 meals and the nurses did not sign for 8/93 meals. In the second month, the feeders did not sign for 24/90 meals and the nurses did not sign for 19/90 meals.

Resident #002's High Risk Intervention Monitoring Tool, it was noted that for the first month, the feeders did not sign for 22/93 meals and the nurses did not sign for 10/93 meals. In the second month, the feeders did no sign for 22/90 meals and the nurses did not sign for 29/90 meals.

The licensee has failed to comply with the policy by not signing the intake binder every meal. [s. 8. (1) (a),s. 8. (1) (b)]



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***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 any plan, policy, protocol, procedure, strategy or system instituted or otherwise put in place is:  
(b) complied with., to be implemented voluntarily.***

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Issued on this 28th day of December, 2018

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

**Original report signed by the inspector.**