



Ministry of Health and Long-Term Care
 Health System Accountability and Performance Division
 Performance Improvement and Compliance Branch

Ministère de la Santé et des Soins de longue durée
 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
 491 King Street, 4th Floor
 London ON N6B 1R8

Bureau régional de services de London
 491, rue King, 4^{ième} étage
 London ON N6B 1R8

Telephone: 519-675-7680
 Facsimile: 519-675-7685

Téléphone: 519-675-7680
 Télécopieur: 519-675-7685

Inspection Report under the LTC Homes Act, 2007 <input checked="" type="checkbox"/> Public Copy <input type="checkbox"/> Licensee Copy		Rapport d'inspection prévue de la Loi de 2007 les foyers de soins de longue durée <input type="checkbox"/> Copie du Titulaire <input type="checkbox"/> Copie de la Publique	
Date(s) of inspection/Date de l'inspection July 21, 2010		Inspection No/ d'inspection 2010_128_1033	Type of Inspection/Genre d'inspection Dietary Follow-up
Licensee/Titulaire Golden Years Nursing Homes(Cambridge) Inc. P.O. Box 3277 704 Eagle Street North, Cambridge, ON N3H 4T3			
Long-Term Care Home/Foyer de soins de longue durée Golden Years Nursing Home 704 Eagle Street North, Cambridge, ON N3H 4T3			
Name of Inspector(s)/Nom de l'inspecteur(s) Ruth Hildebrand (ID # 128) , Bonnie MacDonald (ID # 135)			
Inspection Summary/Sommaire d'inspection			
<p>The purpose of this inspection was to conduct a Dietary Follow-up inspection in respect of the previously identified Area of Non-Compliance: NHA, R.S.O. 1990. Chapter 7, Section 20.10 issued June 30, 2010 and previously issued as B3.25 issued February 2007 and February 2010 and B3.24 issued February 2007 and February 2010.</p> <p>The inspection was conducted by the two (2) inspectors identified above.</p> <p>The inspection occurred on July 21, 2010 with the two (2) inspectors being present on that day.</p> <p>During the course of the inspection, the inspectors spoke with members of the management team, including the Administrator, Director of Care, and Nutrition Manager; residents who reside on North and Main; staff on both of these areas, dietary aides; and Registered Nursing staff. A review of resident records was completed. Lunch was observed in the main dining room and afternoon snack was observed in the North and Main areas.</p> <p>The following Inspection Protocols were used in part or in whole during this inspection: Nutrition and Hydration</p> <p>Findings of Non-Compliance were found during this inspection. The following action was taken: 13 WN 13 VPC 0 Co: CO#</p>			

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

Le suivant constituer un avis d'écrit de l'exigences prévue le paragraph 1 de section 152 de les foyers de soins de longue durée.

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.)

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

- WN – Written Notifications/Avis écrit
- VPC – Plan of correction/Plan de redressement
- DR – Director Referral/Régisseur envoye
- CO – Compliance Order/Ordres de conformité
- WAO – Work and Acitivity Order/Ordres: travaux et activités

WN#1: The Licensee has failed to comply with: LTCHA, 2007, S.O 2007, c.8, 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.

Findings:

1. Lunch Service July 21/10 a resident was provided with 125 mls. of fluid (Ensure+) not the 250- 375 mls. as per the Residents' Care Plan.
2. A resident's Care Plan states that resident is to be provided extensive assistance during the meal and staff is to feed all food to resident. It was noted during Lunch service July 21/10 that the resident was noted as sucking on an empty adaptive cup with lid for 20 minutes and was not provided assistance or additional fluids.
3. During PM. Snack Delivery July 21/10 the resident was noted as sucking on empty adaptive cup with lid after consuming snack beverage and was not provided additional assistance or fluids.

Further Inspector Actions: VPC –pursuant to LTCHA 2007, S.O 2007, c.8, s. 6(7) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.

Inspector ID#: 135
 Required Compliance Date for WN – July 28, 2010
 Required Compliance Date for VPC – August 11, 2010

WN#2: The Licensee has failed to comply with: LTCHA, 2007, S.O 2007, c.8, s. 6(10)(b)
The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when, the resident's care needs change or care set out in the plan is no longer necessary.

Findings:

1. It was noted that a resident was assessed by RD as requiring 1125 mls. of fluid/day. For the period July 12-19, 2010 the resident's average daily fluid intake was 446 mls. or 39.6% of their assessed daily requirement. A referral to the home's Dietitian has not been initiated to reassess the resident for significant change in hydration status.

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 suivant constituer un avis d'écrit de l'exigences prévue le paragraph 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

Further Inspector Actions

VPC –pursuant to LTCHA 2007, S.O 2007, c.8, s. 6(10)(b) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.

Inspector ID#: 135

Required Compliance Date for WN – July 28, 2010

Required Compliance Date for VPC – August 11, 2010

WN#3 : The Licensee has failed to comply with: LTCHA, 2007, S.O 2007, c.8, s. 11(2)

Without restricting the generality of subsection (1), every licensee shall ensure that residents are provided with food and fluids that are safe, adequate in quantity, nutritious and varied.

Findings:

1. Lunch Service July 21/10 a resident was provided with 125 mls. of fluid (Ensure+) not the 250-375 mls. as per the Residents' Care Plan

Further Inspector Actions:

VPC –pursuant to LTCHA 2007, S.O 2007, c.8, s. 11(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.

Inspector ID#: 135

Required Compliance Date for WN – July 28, 2010

Required Compliance Date for VPC – August 11, 2010.

WN#4: The Licensee has failed to comply with: O. Reg. 79/10, s24(9)(a)

The licensee shall ensure that the resident is reassessed and the care plan is reviewed and revised when, the resident's care needs change.

Findings:

1. The care plan does not reflect current goals and or interventions to address high risk resident's ongoing weight loss concerns. The care plan indicates that the goal is to maintain current weight of 50 kg in the next three months. The resident's current weight is only 42.2 kg.

Further Inspector Actions

VPC –pursuant to O. Reg. 79/10, s 24(9) (a) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.

Inspector ID#: 128

Required Compliance Date for WN – July 28, 2010

Required Compliance Date for VPC – August 11, 2010

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 suivant constituer un avis d'écrit de l'exigences prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN#5: The Licensee has failed to comply with: O. Reg. 79/10, s26(3)(14)

A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident: Hydration status and any risks relating to hydration.

Findings:

1. Plan of care for has not been reassessed through the interdisciplinary process for referral to the homes' Dietitian for significant change in resident's hydration status. A resident for the period July 12-19, 2010 had an average daily fluid intake of 446 mls/day or 39.6% of their daily fluid requirement.

Further Inspector Actions

VPC –pursuant to O. Reg. 79/10, s26(3)(14) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.

Inspector ID#: 135

Required Compliance Date for WN – July 28, 2010

Required Compliance Date for VPC – August 11, 2010

WN#6: The Licensee has failed to comply with: O. Reg. 79/10, s26(4)(a)

The licensee shall ensure that a registered dietitian who is a member of the staff of the home, completes a nutritional assessment for all residents on admission and whenever there is a significant change in a resident's health condition.

Findings:

1. It was noted that a resident was assessed by RD as requiring 1125 mls. of fluid/day. For the period July 12-19, 2010 the resident's average daily fluid intake was 446 mls. or 39.6% of their assessed daily requirement. A referral to the home's Dietitian has not been initiated to reassess the resident for significant change in hydration status.

Further Inspector Actions

VPC –pursuant to O. Reg. 79/10, s26(4)(a) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.

Inspector ID#: 135

Required Compliance Date for WN – July 28, 2010

Required Compliance Date for VPC – August 11, 2010

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 suivant constituer un avis d'écrit de l'exigences prévue le paragraph 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN#7: The Licensee has failed to comply with: O. Reg. 79/10, s26(3)(13)

A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident: Nutritional status, including height, weight and any risks relating to nutrition care.

Findings:

1. There is no evidence of an interdisciplinary assessment of a high risk resident related to ongoing weight loss. The resident has now lost 8.8kg (17.3%).

Further Inspector Actions:

VPC –pursuant to O. Reg. 79/10, s26(3)(13) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.

Inspector ID#: 128

Required Compliance Date for WN – July 28, 2010

Required Compliance Date for VPC – August 11, 2010

WN#8: The Licensee has failed to comply with: O. Reg. 79/10, s68(2)(d)

Every licensee of a long-term care home shall ensure that the programs include, a system to monitor and evaluate the food and fluid intake of residents with identified risks related to nutrition and hydration.

Findings:

1. A resident has not had a snack, at afternoon or HS for the month of July 2010, as per the Snack Intake/Hydration Intake record. There is no evidence of an evaluation of these records by the multidisciplinary team and/or a referral made to the Registered Dietitian. Resident is continuing to lose weight.
2. The Home's Snack Intake/Hydration Intake monthly monitoring sheet is used to track resident's daily food and fluid intake. A resident was not evaluated for poor fluid intake averaging 446 mls. /day for the period July 12-19, 2010. This was well below the Resident's daily fluid requirement of 1125 mls. /day.

Further Inspector Actions

VPC –pursuant to O. Reg. 79/10, s68(2)(d) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.

Inspector ID#: 128 & 135

Required Compliance Date for WN – July 28, 2010

Required Compliance Date for VPC – August 11, 2010

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 suivant constituer un avis d'écrit de l'exigences prévue le paragraph 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN#9: The Licensee has failed to comply with: O. Reg. 79/10, s69(3)

Every licensee of a long-term care home shall ensure that residents with the following weight changes are assessed using an interdisciplinary approach, and that actions are taken and outcomes are evaluated: A change of 10 per cent of body weight, or more, over 6 months.

Findings:

1. There is no evidence of an evaluation of the ongoing weight loss for a high risk resident. Additionally, there is no evidence of a referral to the Registered Dietitian and the resident has lost 8.8 kg. (17.3%) in 6 months.

Further Inspector Actions

VPC –pursuant to O. Reg. 79/10, s69(3) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.

Inspector ID#: 128

Required Compliance Date for WN – July 28, 2010

Required Compliance Date for VPC – August 11, 2010

WN#10: The Licensee has failed to comply with: O. Reg. 79/10, s71(3)(b)

The licensee shall ensure that each resident is offered a minimum of, a between-meal beverage in the morning and afternoon and a beverage in the evening after dinner.

Findings:

1. A resident, who is at high risk related to significant weight loss was sleeping during afternoon snack July 21, 2010. Resident was not offered a beverage.

Further Inspector Actions

VPC –pursuant to O. Reg. 79/10, s71(3)(b) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.

Inspector ID#: 128

Required Compliance Date for WN – July 28, 2010

Required Compliance Date for VPC – August 11, 2010

WN#11: The Licensee has failed to comply with: O. Reg. 79/10, s71(3)(c)

The licensee shall ensure that each resident is offered a minimum of, a snack in the afternoon and evening.

Findings:

1. A resident, who is at high risk related to significant weight loss, was sleeping during afternoon snack July 21, 2010. Resident was not offered a snack.

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 suivant constituer un avis d'écrit de l'exigences prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

Further Inspector Actions

VPC –pursuant to O. Reg. 79/10, s71(3)(c) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.

Inspector ID#: 128

Required Compliance Date for WN – July 28, 2010

Required Compliance Date for VPC – August 11, 2010

WN#12: The Licensee has failed to comply with: LTCHA, 2007, S.O 2007, c.8, s. 11(2) Without restricting the generality of subsection (1), every licensee shall ensure that residents are provided with food and fluids that are safe, adequate in quantity, nutritious and varied.

Findings:

1. The full menu plan was not offered to a resident i.e. no pureed bread offered, at the lunch meal, on July 21, 2010.

Further Inspector Actions

VPC –pursuant to LTCHA 2007, S.O 2007, c.8, s. 11(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.

Inspector ID#: 128

Required Compliance Date for WN – July 28, 2010

Required Compliance Date for VPC – August 11, 2010

WN#13: The Licensee has failed to comply with: O. Reg. 79/10, s73(1)(9)

Every licensee of a long-term care home shall ensure that the home has a dining and snack service that includes, at a minimum, the following elements: Providing residents with any eating aids, assistive devices, personal assistance and encouragement required to safely eat and drink as comfortably and independently as possible.

Findings:

1. A resident's Care Plan states that resident is to be provided extensive assistance during the meal and staff is to feed all food to resident. It was noted during Lunch service July 21/10 that the resident was noted as sucking on an empty adaptive cup with lid for 20 minutes and was not provided assistance or additional fluids.
2. During PM. Snack Delivery July 21/10 the resident was noted as sucking on empty adaptive cup with lid after consuming snack beverage (Ensure+) and was not provided assistance or additional fluids.



The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

Le suivant constituer un avis d'écrit de l'exigences prévue le paragraph 1 de section 152 de les foyers de soins de longue durée.

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.)

Non-respect avec les exigences sur le Loi de 2007 les foyers de soins de longue durée à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

Further Inspector Actions

VPC –pursuant to O. Reg. 79/10, s73(1)(9c) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to be implemented voluntarily.

Inspector ID#: 135

Required Compliance Date for WN – July 28, 2010

Required Compliance Date for VPC – August 11, 2010

Signature of Licensee or Designated Representative
Signature du Titulaire du représentant désigné

Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.

Title:

Date:

Date of Report (if different from date(s) of inspection).
September 10, 2010