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

Rapport d'inspection prévue le *Loi de 2007 les foyers de soins de longue durée*

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
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, 4iém étage
London ON N6B 1R8

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

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Date(s) of inspection/Date de l'inspection	**Inspection No/ d'inspection**	**Type of Inspection/Genre d'inspection**
September 22 and 23, 2010	2010_170_1033_22Sep094753	Critical Incident – Mandatory Reporting #L-00972

Licensee/Titulaire
Golden Years Nursing Homes (Cambridge) Inc., 704 Eagle Street North, P.O. Box 3277, Cambridge, ON, N3H 4T3

Long-Term Care Home/Foyer de soins de longue durée
Golden Years Nursing Home, 704 Eagle Street North, P.O. Box 3277, Cambridge, ON, N3H 4T3

Name of Inspector(s)/Nom de l'inspecteur(s)
Dianne Wilbee (#170)

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a Critical Incident inspection.

During the course of the inspection, the inspector(s) spoke with: Administrator, Assistant Director of Care, RAI Coordinator, Registered Nurses, Registered Practical Nurses, Personal Support Workers.

During the course of the inspection, the inspector(s): Review Critical Incident Report, Reviewed resident record, Reviewed Non-Abuse policy and procedure, Head Injury policy and procedure, Aggressive Residents policy, Preventing Resident Aggression policy and procedure, Observation of residents.

The following Inspection Protocols were used in part or in whole during this inspection:

- Responsive Behaviours
- Critical Incidents Response

☒ Findings of Non-Compliance were found during this inspection. The following action was taken:

2 WN
2 VPC

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

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'exigence 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 #1: The Licensee has failed to comply with 0.Reg. 79/10, s.53(1)1
(1) Every licensee of a long-term care home shall ensure that the following are developed to meet the needs of residents with responsive behaviours:
1. Written approaches to care, including screening protocols, assessment, reassessment and identification of behavioural triggers that may result in responsive behaviours, whether cognitive, physical, emotional, social, environmental or other.

Findings:
The plan of care did not identify behavioural triggers and interventions for:

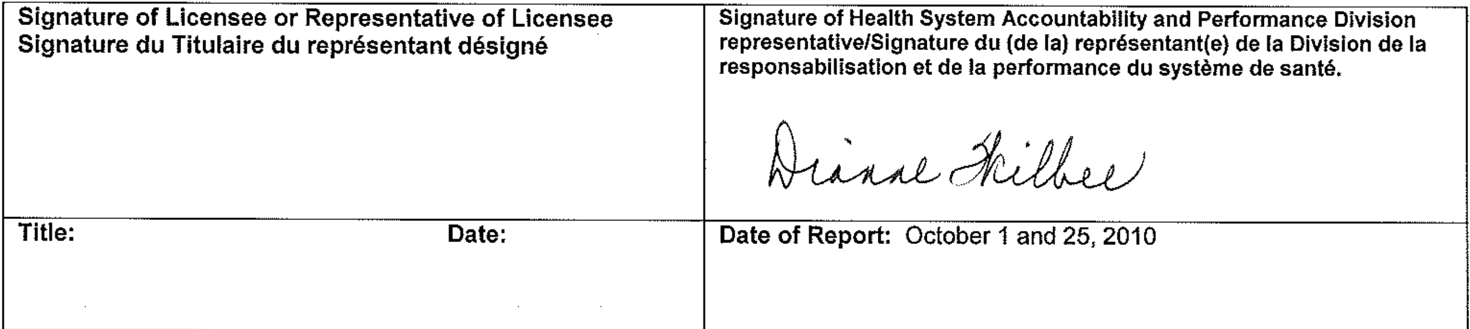
1. An identified resident's plan of care stated the resident had verbal and physical aggression related to sensory overload stimulation and interactions from or by other residents. Interventions to reduce the resident's exposure to stimulation and to prevent aggression in relation to other residents were not identified.
2. A second identified resident's plan of care stated the resident had verbal and physical aggression and a history of aggression. The resident's potential to become angry if staff did not immediately attend to the resident's needs and yelling related to areas of discomfort were not identified on the plan of care.

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 related to inclusion of behavioural triggers on the plan of care, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with LTCHA, 2007, S.O. 2007, c.8, s.6(10)(b)
(10) 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,
(b) the resident's care needs change or care set out in the plan is no longer necessary.

Findings:
A resident sustained an injury and received nursing interventions at the time of the injury. The plan of care was not revised related to the injury and the Treatment Administration Record was not updated to reflect the change in the resident's care needs.

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 with revising the plan of care when a resident's care needs change, to be implemented voluntarily.



Signature of Licensee or Representative of Licensee 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. Dianne Wilbee
Title: Date:	Date of Report: October 1 and 25, 2010