



**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

Ottawa Service Area Office
347 Preston St., 4th Floor
Ottawa ON K1S 3J4

Bureau régional de services d'Ottawa
347, rue Preston, 4^{ième} étage
Ottawa ON K1S 3J4

**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

Telephone: 613-569-5602
Facsimile: 613-569-9670

Téléphone: 613-569-5602
Télécopieur: 613-569-9670

Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
March 15 & 16, 2011	2011_124_2728_14Mar165336	Follow-up-O-000361

Licensee/Titulaire
Gibson Holdings (Ontario) Ltd., 343 Amherst Drive, Amherstview ON K7N 1X3 Fax: 613-384-9407

Long-Term Care Home/Foyer de soins de longue durée
Helen Henderson Nursing Home, 343 Amherst Drive, Amherstview, ON K7N 1X3 Fax: 613-384-9407

Name of Inspector(s)/Nom de l'inspecteur(s)
Lynda Hamilton (124)

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a follow up to a complaint inspection regarding the home having twenty-four hour on-site registered nurse coverage.

During the course of the inspection, the inspector spoke with the Administrator, the Director of Care, three registered nurses and the Business Manager.

During the course of the inspection, the inspector reviewed the twelve- hour shift reports, the HHCC Nursing Time Allocation to Lodge reports and the minutes of the January 27, 2011 registered staff meetings.

The following Inspection Protocols were used in part or in whole during this inspection:
Sufficient Staffing Inspection Protocol.

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

- 2 WN
- 1 DR



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 LTCHA 2007, S.O. 2007, c.8, s.8
(3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations.

Findings:

1. Helen Henderson is a long-term care home with an attached retirement home.
2. Two registered nurses (RN) reported having been called to the retirement home to provide care to retirement home residents on March 6 & 13, 2011. There was only one RN on duty at this time.
3. It was documented on the twelve-hour report that on January 26 & 29, 2011 and February 4 & 8, 2011 the registered nurse provided care to retirement home residents and there was only one RN on duty at the time.
4. When there is only one RN on duty and that RN is assisting a resident in the retirement home, the registered nurse is not on duty and present in the licensed home.

DR – The above written notification is also being referred to the Director for further action by the Director.

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WN #2: The Licensee has failed to comply with O.Reg. 79/10, 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, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,
(b) is complied with.

Findings:

- (1) The minutes of the January 27, 2011 registered nurses' meeting stated that "Lodge concerns will be addressed ongoing by the RPN who will have Lodge Manager accessible by phone for assistance if necessary."
- (2) The minutes of the January 27, 2011 registered practical nurses' meeting stated that "Included in the role of the RPN is also to assist Lodge aides in managing any difficulties that arise in the Lodge."
- (3) Two registered nurses (RN) reported having been called to the retirement home (Lodge) to provide



care to retirement home residents on March 6 & 13, 2011. This is contrary to the direction registered nursing staff received at the meeting held on January 27, 2011.

- (4) It was documented on the twelve-hour report on January 29, 2011 and February 4 & 8, 2011 the registered nurse provided care to retirement home residents. This is contrary to the direction registered nursing staff received at the meeting held on January 27, 2011.

Inspector ID #: 124

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.

Title:

Date:

J. MacLeod for L Hamilton Mar 18/11
Date of Report: (if different from date(s) of inspection).