



**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 sous la
Loi de 2007 sur les foyers de
soins de longue durée**

**Health System Accountability and
Performance Division
Performance Improvement and
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**Division de la responsabilisation et de la
performance du système de santé
Direction de l'amélioration de la
performance et de la conformité**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Aug 29, 2014	2014_288549_0034	O-000823- 14	Critical Incident System

Licensee/Titulaire de permis

THE OTTAWA JEWISH HOME FOR THE AGED
10 Nadolny Sachs Private, Ottawa-Carleton, ON, K2A-4G7

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

HILLEL LODGE
10 NADOLNY SACHS PRIVATE, OTTAWA, ON, K2A-4G7

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

RENA BOWEN (549)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): August 26 and 27, 2014

During the course of the inspection, the inspector(s) spoke with several Registered Practical Nurses (RPN), a Social Worker, the Director of Care, a Personal Support Worker (PSW), the Recreation and Volunteer Manager, a Restorative Care Aide, the Administrator and a family member.

During the course of the inspection, the inspector(s) reviewed a resident's health care file , the recreation program attendance records, the exercise program attendance records, and the home's investigation documentation.

**The following Inspection Protocols were used during this inspection:
Hospitalization and Change in Condition**

Findings of Non-Compliance were found during this inspection.



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>Legendé</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>

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:

- s. 6. (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,**
- (a) a goal in the plan is met; 2007, c. 8, s. 6 (10).**
 - (b) the resident's care needs change or care set out in the plan is no longer necessary; or 2007, c. 8, s. 6 (10).**
 - (c) care set out in the plan has not been effective. 2007, c. 8, s. 6 (10).**

Findings/Faits saillants :



1. The licensee has failed to ensure that the plan of care is reviewed and revised when the resident's care needs change.

Resident #1's current written plan of care related to Depression interventions stated the following; encourage adequate rest periods; encourage and allow open expression of feelings, reinforce appropriate expression of feelings; encourage physical mobility, exercise daily as tolerated; invite to activities of choice, offer to escort to activities if desired; monitor/document/report to nurse/MD/ signs and symptoms of depression, including anxiety, verbalizing negative statements, repetitive anxious or health-related complaints, tearfulness.

Resident #1's care needs were re-assessed on a specific date, indicating a change in the care needs for the resident.

Resident #1's care needs were re-assessed again on a different specific date indicating a change in the care needs for the resident.

The plan of care was not reviewed and revised to reflect the change in Resident #1's care needs.

The Director of Care indicated to Inspector #549 that the home's expectations when a resident's care needs have changed the plan of care is reviewed and revised to reflect the change in the care needs. [s. 6. (10) (b)]

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 when a resident's care needs change the plan of care is reviewed and revised, to be implemented voluntarily.



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Issued on this 29th day of August, 2014

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