



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

**Rapport d'inspection  
révisé 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

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**Ministère de la Santé et des Soins de  
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<b>Date of inspection/Date de l'inspection</b> May 10, 2011	<b>Inspection No/ d'inspection</b> 2011_172_9601_09May132418	<b>Type of Inspection/Genre d'inspection</b> Critical Incidents L-000456 L-000486
<b>Licensee/Titulaire</b> Corporation of the County of Huron, c/o Huronlea Home for the Aged, 820 Turnberry St. S., Brussels, Ontario, N0G 1H0		
<b>Long-Term Care Home/Foyer de soins de longue durée</b> Huronlea Home for the Aged, 820 Turnberry St. S., Brussels, Ontario, N0G 1H0		
<b>Name of Inspector/Nom de l'inspecteur</b> Joan L. Woodley, ID # 172		
<b>Inspection Summary/Sommaire d'inspection</b>		
<p>The purpose of this inspection was to conduct a Critical Incident inspection.</p> <p>During the course of the inspection, the inspector spoke with: 1 Activation Aide, 2 Personal Support Workers, 2 Registered Practical Nurses, 1 Registered Nurse, Director of Nursing and Personal Care, and family member.</p> <p>During the course of the inspection, the inspector: reviewed 3 resident files, held staff and family interviews, and observed care .</p> <p>The following Inspection Protocols were used: Prevention of Abuse , Neglect, and Retaliation, Responsive Behaviour.</p> <p><input checked="" type="checkbox"/> Findings of Non-Compliance were found during this inspection. The following action was taken: 3 WN</p>		

*Revised for Publication*

**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.19(1)

Every licensee of a long-term care home shall protect residents from abuse by anyone and shall ensure that residents are not neglected by the licensee or staff.

**Findings:**

1. Chart review and Critical Incident confirmed that on [REDACTED] a resident struck another resident resulting in an injury.
2. Chart review and Critical Incident confirmed that on [REDACTED] a resident punched another resident resulting in an injury.

**WN #2:** The Licensee has failed to comply with LTCHA, 2007, S.O. 2007,c.8, s.6(1)(c)

Every Licensee of a long term care home shall ensure that there is a written plan of care for each resident that sets out,  
(c) clear directions to staff and others who provided direct care to the resident.

**Findings:**

1. May 10, 2011 1345hrs. Through staff interviews with 2 RPN's it was confirmed that a resident no longer had a certain care need.
2. A chart review confirmed the care need was no longer required and different interventions were in place.
3. The care plan still references interventions specific to the original care need.



WN #3: 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, (b) the resident's care needs change or care set out in the plan is no longer necessary;

Findings:

- 1. May 10, 2011 1345 hrs - Care plan review shows interventions for a care need that no longer exist, is on the care plan.
2. Staff Interviews confirmed the resident no longer has this care need.
3. Staff interview with Director of Nursing and Personal Care confirmed these interventions were no longer applicable .

Table with 2 columns: 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. Includes handwritten signature of Joan L. Hoodley and date May 17, 2011.