Ontario

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

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Date(s) of Inspection/Date de l'Inspection	Inspection No/ d'Inspection	Type of Inspection/Genre d'Inspection
October 4, 2010	2010_112_2729_04Oct084340	Complaint L-01194

Licensee/Titulaire

Sharon Farms & Enterprises Limited, 1340 Huron St., London, ON N5V 3R3

Long-Term Care Home/Foyer de soins de longue durée
Kensington Village, 1340 Huron St. London, ON N5V 3R3

Name of Inspector(s)/Nom de l'Inspecteur(s)

Carole Alexander Inspector #112

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection related to personal care and service provisions.

During the course of the inspection, the inspector spoke with: Director of Care, Administrator, Residents, Registered staff, PSW staff

During the course of the inspection, the inspector: Reviewed a resident's health record including progress notes, resident's care plan, conference discussions, resident consultation assessments, quarterly review and admission contract and accommodation billing information.

The following Inspection Protocols were used in part or in whole during this inspection:
Personal and Support Services Inspection Protocol
Pain Inspection Protocol.

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

6 WN
6 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 Ontario Regulation 79/10 s.131(2)
The licensee shall ensure that drugs are administered to residents in accordance with the directions for use specified by the prescriber.

Findings:

A resident had a pain medication ordered for a specific condition which she did not receive as ordered by the prescriber.

Inspector ID #:	112

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 with ensuring resident receipt of medications as prescribed is provided, to be implemented voluntarily

WN #2: The Licensee has failed to comply with Ontario Regulation 79/10 s. 24(6)
The licensee shall ensure that the care set out in the care plan is provided to the resident as specified in the plan.

Findings:

1) The Resource supplement as ordered on Sept 21, 2010 and specified in resident's plan of care was not provided from Sept 21, 2010 to October 4, 2010.
2) Resident need for a pain assessment as specified in the plan of care was not provided.
3) Resident approach to care provisions for ADL's such as feeding and bathing was not consistently provided as specified in the plan.

Inspector ID #:	112

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 with resident care plan interventions are provided, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with Ontario Regulation 79/10 s. 33(1)
Every licensee of a long-term care home shall ensure that each resident of the home is bathed, at a minimum, twice a week by the method of his or her choice and more frequently as determined by the resident's hygiene requirements, unless contraindicated by a medical condition.

Findings:
Resident was not bathed twice weekly. When resident refused, bathing was not attempted until the next regularly scheduled bathing day and time. Resident was not bathed on August 4 – 09, 2010 and August 29 – Sept 4, 2010 (inclusive)

Inspector ID #:	112

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 with bathing requirements, to be implemented voluntarily.

WN #4: The Licensee has failed to comply with Ontario Regulation 79/10 s. 8(1)(b)
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, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system, (b) is complied with.

Findings:
1) Resident with a new diagnosis indicative of pain did not have a pain assessment and or reassessment according to resident's needs, and in accordance with the home's policy.
2) The 2nd floor unit weigh scale was broken for a period of 3 weeks and the home's plan for staff to utilize other unit scale was not complied with.

Inspector ID #:	112

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 in ensuring following facility policies, to be implemented voluntarily.

WN #5: The Licensee has failed to comply with Ontario Regulation 79/10 s. 52(2)
Every licensee of a long-term care home shall ensure that when a resident's pain is not relieved by initial interventions, the resident is assessed using a clinically appropriate assessment instrument specifically designed for this purpose.

Findings:
A resident who was experiencing pain was not assessed using a clinically appropriate assessment instrument when the initial pain interventions were not successful.

Inspector ID #:	112

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 with resident pain assessments, to be implemented voluntarily

WN #6: The Licensee has failed to comply with Ontario Regulation 79/10 s.53(4)(c)
The licensee shall ensure that, for each resident demonstrating responsive behaviours, (c) actions are taken to the needs of the resident, including assessments, reassessments and interventions and the resident's responses to interventions are documented

Findings:
Assessment information from outside specialty resources, related to individualized behavioural management interventions, were not followed through with internal assessments in keeping with the resident's needs for consistent approach to interventions

Inspector ID #:	112

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 with ensuring resident behavioural assessments, to be implemented voluntarily

WIN #7: The Licensee has failed to comply with The Long Term Care Homes Act, 2007 S.O. c. 8, s. 15(2)(c)
Every licensee of a long term care home shall ensure that, (c) the home, furnishings and equipment are maintained in a safe condition and in a good state of repair.

Findings:
The second floor unit scale was broken for a period of 3 weeks.

Inspector ID #:	112

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 with equipment state of repair, 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.**
Title: **Date:**	**Date of Report: October 15, 2010**