



**Ministry of Health and
Long-Term Care**

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

**Ministère de la Santé et des
Soins de longue durée**

**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
Compliance Branch**

**Division de la responsabilisation et de la
performance du système de santé
Direction de l'amélioration de la
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Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jan 8, 2015	2015_258519_0001	008121-14	Complaint

Licensee/Titulaire de permis

LAPOINTE-FISHER NURSING HOME, LIMITED
1934 DUFFERIN AVENUE WALLACEBURG ON N8A 4M2

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

LAPOINTE-FISHER NURSING HOME
271 METCALFE STREET GUELPH ON N1E 4Y8

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

SHERRI GROULX (519)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): January 5 and 6, 2015

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Nursing, the Maintenance Manager, and Residents.

**The following Inspection Protocols were used during this inspection:
Accommodation Services - Housekeeping**



During the course of this inspection, Non-Compliances were issued.

- 1 WN(s)**
- 0 VPC(s)**
- 0 CO(s)**
- 0 DR(s)**
- 0 WAO(s)**

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 O.Reg 79/10, s. 12. Furnishings



Specifically failed to comply with the following:

s. 12. (2)The licensee shall ensure that,

(a) resident beds have a firm, comfortable mattress that is at least 10.16 centimetres thick unless contraindicated as set out in the resident's plan of care;

O. Reg. 79/10, s. 12 (2).

(b) resident beds are capable of being elevated at the head and have a headboard and a footboard; O. Reg. 79/10, s. 12 (2).

(c) roll-away beds, day beds, double deck beds, or cots are not used as sleeping accommodation for a resident, except in an emergency; O. Reg. 79/10, s. 12 (2).

(d) a bedside table is provided for every resident; O. Reg. 79/10, s. 12 (2).

(e) a comfortable easy chair is provided for every resident in the resident's bedroom, or that a resident who wishes to provide their own comfortable easy chair is accommodated in doing so; and O. Reg. 79/10, s. 12 (2).

(f) a clothes closet is provided for every resident in the resident's bedroom. O. Reg. 79/10, s. 12 (2).

Findings/Faits saillants :



1. The licensee failed to ensure that a comfortable easy chair is provided for every resident in the resident's bedroom, or that a resident who wishes to provide their own comfortable easy chair is accommodated in doing so.

On January 5, 2015 at 1330 hours it was observed in several ward rooms that there was only one office chair for the four residents in the room to sit on. Resident # 001 was sleeping in their bed, Resident # 002 was sitting up in their wheelchair sleeping, Resident # 003 was sleeping in their bed, and Resident # 004 was just returning to their room.

Upon interview with Resident # 003, and Resident # 004 they stated they would like to have a chair to sit on and would use it if were in the room. They declined providing their own chair.

Continued observations of several other ward rooms revealed that there were three rooms out of four rooms that did not have a comfortable easy chair for every resident.

Upon interview with Resident # 005 it was stated that if a chair were provided then they would use it. They declined providing their own chair.

Upon interview with the Environmental Services Manager January 5, 2015 at 1455 hours, it was confirmed that there should be one chair for every resident in the ward rooms. It was confirmed that the chairs are available in the home as he stated that he ordered extra for that reason alone. He felt they must have been moved out of the rooms over the holidays for social events. He confirmed he would replace the chairs in the ward rooms so every resident would have their own chair. [s. 12. (2) (e)]



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Issued on this 8th day of January, 2015

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

Original report signed by the inspector.