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
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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
May 27, 2014	2014_207147_0005	H-000029-14 AND H-000109-14	Complaint

Licensee/Titulaire de permis

2063414 ONTARIO LIMITED AS GENERAL PARTNER OF 2063414 INVESTMENT LP
302 Town Centre Blvd.,, Suite #200, TORONTO, ON, L3R-0E8

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

LEISUREWORLD CAREGIVING CENTRE - BRAMPTON WOODS
9257 Goreway Drive, BRAMPTON, ON, L6P-0N5

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

LALEH NEWELL (147)

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): February 6, 7, 20, 21, 24, 25 and April 4, 2014

H-000109-14
H-000029-14

During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care (DOC), Assistant Director of Care (ADOC), Nurse Managers, Registered Staff, Behavioural Support Nurse, Personal Support Workers (PSW), Physician, Psychiatrist, Nurse Practitioner, Physiotherapist, Dietitian, Food Services Supervisor, residents and families.

During the course of the inspection, the inspector(s) reviewed residents clinical charts, home's internal investigation notes, staff personnel file, home's policy and procedure related to Prevention of Abuse, Falls Prevention and Responsive Behaviours,

The following Inspection Protocols were used during this inspection:
Continence Care and Bowel Management
Falls Prevention
Nutrition and Hydration
Personal Support Services
Prevention of Abuse, Neglect and Retaliation
Responsive Behaviours

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	Legendé WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
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.) The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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. Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l’article 152 de la LFSLD.

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. (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan. 2007, c. 8, s. 6 (7).

Findings/Faits saillants :

1. The licensee failed to ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

A. Resident #107 sustained a fall on an identified date in September 2013 and was sent to hospital for further assessment related to the injuries. A follow up x-ray was completed in the home a few days after the resident was discharged back to the home and recommendation was made by the Radiologist for the re-evaluation of the injured area within one weeks’ time. Review of the resident’s clinical records and interview with the staff, confirmed that due to issues with the home’s x-ray contract services the follow up x-ray for the resident was not completed until several weeks later.

B. Resident #107’s plan of care indicated the resident was at high risk for recurrent Urinary Tract Infection (UTI) and interventions were in place to ensure staff collected urine samples for Culture and Sensitivity (C&S). However, review of the laboratory results for four different urine collections between February and March 2014 indicated that the resident’s urine was reported to be contaminated and no further attempts were made by the staff to repeat any of the contaminated samples for C&S results.

C. Resident #110’s plan of care and interview with the dietitian confirmed that the resident is at high risk for nutritional needs and has been assessed since admission to the home to be provided with a vegetarian diet.
However, it was observed during lunch meal on February 21, 2014 that the resident was offered two choices, roast beef and tuna-macaroni salad, the resident chose tuna-macaroni salad. The resident was observed to be eating the tuna-macaroni salad, until the inspector intervened and informed the staff and the dietitian regarding the non-vegetarian meal the resident was consuming.

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 the care set out in the plan of care is provided to the resident as specified in the plan, to be implemented voluntarily.

Issued on this 16th day of June, 2014

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