

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

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Report Date(s) /	Inspection No /	Log # /	Type of Inspection / Genre d'inspection
Date(s) du Rapport	No de l'inspection	Registre no	
Nov 15, 28, 2013	2013_279540_0001	H-000652- 13, H- 000717-13	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 - BRANTFORD

389 WEST STREET, BRANTFORD, ON, N3R-3V9

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

KATE MACNAMARA (540), CYNTHIA DITOMASSO (528), LISA VINK (168)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): November 7, 2013, November 13, 2013, and November 14, 2013.

This inspection included complaints H-000652-13, and H-000717-13.

During the course of the inspection, the inspector(s) spoke with Director of Care, Administrator, Personal Support Workers (PSW), Registered Nurse (RN), Social Worker (SW), Registered Practical Nurse (RPN), Resident Assessment Instrument (RAI-coordinator), and residents.

During the course of the inspection, the inspector(s) toured the home, observed the provision of care and services to residents and reviewed relevant documents including, but not limited to: policies and procedures, plans of care, meeting minutes, and work routines.

The following Inspection Protocols were used during this inspection: Family Council

Medication

Personal Support Services

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES			
Legend	Legendé		
WN - Written Notification	WN – Avis écrit		
VPC - Voluntary Plan of Correction	VPC – Plan de redressement volontaire		
DR - Director Referral	DR – Aiguillage au directeur		
CO - Compliance Order	CO – Ordre de conformité		
WAO - Work and Activity Order	WAO – Ordres : travaux et activités		



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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 nonrespect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 34. Oral care Specifically failed to comply with the following:

- s. 34. (1) Every licensee of a long-term care home shall ensure that each resident of the home receives oral care to maintain the integrity of the oral tissue that includes,
- (a) mouth care in the morning and evening, including the cleaning of dentures; O. Reg. 79/10, s. 34 (1).
- (b) physical assistance or cuing to help a resident who cannot, for any reason, brush his or her own teeth; and O. Reg. 79/10, s. 34 (1).
- (c) an offer of an annual dental assessment and other preventive dental services, subject to payment being authorized by the resident or the resident's substitute decision-maker, if payment is required. O. Reg. 79/10, s. 34 (1).

Findings/Faits saillants:



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1. Residents who could not brush their own teeth did not receive physical assistance or cueing to brush their own teeth.

The plan of care for resident #001 identified extensive assistance of staff for oral care twice per day and as needed. Monitoring of the oral care supplies revealed that the denture brush was dry on November 14, 2013, at 0953 hours and the toothpaste remained in the same position and unopened from November 13, 2013, at 1020 hours until November 14, 2013, at 0948 hours. PSW staff interviewed confirmed that the resident did not receive assistance with oral care and did not have their teeth brushed on the morning of November 14, 2013. [s. 34. (1) (b)]

2. The plan of care for resident #004 stated that staff were to assist with cleaning teeth and teeth were to be brushed three times per day. The resident's toothbrush and toothpaste were monitored on November 13, 2013, at 1020 hours and again at 1415 hours, at which time they were noted to remain dry and untouched. Interview with PSW staff on November 13, 2013, at 1420 hours confirmed that oral care was normally provided to the resident morning, after lunch, and evening however, on this day was not provided to the resident following the noon meal. Point of Care (POC) documentation reviewed identified that between November 1, 2013, and November 13, 2013, oral care was only documented as being completed twice per day with the exception of November 9, 2013, which was recorded as completed on three occasions. [s. 34. (1) (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 all residents who cannot, for any reason, brush his or her own teeth, receive physical assistance or cueing, to be implemented voluntarily.



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Issued on this 28th day of November, 2013

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

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Page 5 of/de 5