

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 performance et de la conformité

London Service Area Office 291 King Street, 4th Floor LONDON, ON, N6B-1R8 Telephone: (519) 675-7680 Facsimile: (519) 675-7685

Bureau régional de services de London 291, rue King, 4iém étage LONDON, ON, N6B-1R8 Téléphone: (519) 675-7680 Télécopieur: (519) 675-7685

Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport

Jun 18, 2013

Inspection No / No de l'inspection

2013_183135 0019

Log #/ Type of Inspection / Registre no Genre d'inspection

L-000353-13 Complaint

Licensee/Titulaire de permis

DEVONSHIRE ERIN MILLS INC.

SUR Nursing Homes Ltd.

195 DUFFERIN AVENUE, SUITE 800, LONDON, ON, N6A-1K7

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

LONGWORTHLONG TERM CARE FACILITY Westmount Gardens, Long Term Care 590 Longworth Road, LONDON, ON, N6K-4X9

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

BONNIE MACDONALD (135)

Inspection Summary/Résumé de l'inspection



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

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

This inspection was conducted on the following date(s): June 3, 2013 and June 7, 2013.

During the course of the inspection, the inspector(s) spoke with Administrator, Corporate Vice President for Long Term Care, Director of Care, Assistant Director of Care, 2 Registered Practical Nurses, Nurse Practitioner, Recreation Therapist, 2 Personal Support Workers and 5 residents.

During the course of the inspection, the inspector(s) reviewed critical incident, related internal investigation, resident clinical records, policies and procedures for responsive behaviours, and continence care and bowel management. Observations of residents were conducted in resident home areas.

The following Inspection Protocols were used during this inspection: Continence Care and Bowel Management

Medication

Responsive Behaviours

Findings of Non-Compliance were found during this inspection.

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



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

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 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. Resident's medical directives for bowel care in the plan of care states: if there has been no bowel movement after day 3, Milk of Magnesia 30-60 mls. will be given. If still no bowel movement after day 4, Bisacodyl 10 mg. suppository will be given and if after day 5 still no bowel movement a fleet enema will be given.

Record review with Registered Practical Nurse revealed the bowel care was not provided to the resident as per the plan of care and there was no evidence that resident had refused treatment:

Director of Care confirmed her expectation that care set out in the plan of care is provided to the resident as specified in the plan. [s. 6. (7)]



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

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

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 30. General requirements

Specifically failed to comply with the following:

s. 30. (2) The licensee shall ensure that any actions taken with respect to a resident under a program, including assessments, reassessments, interventions and the resident's responses to interventions are documented. O. Reg. 79/10, s. 30 (2).

Findings/Faits saillants:

Resident's plan of care identified that staff was to monitor resident using the behavioural mapping sheet to track and document resident's behaviours. A review of resident's Behaviour Mapping Tool, revealed resident's behaviours were not documented.

Director of Care confirmed her expectation the resident's responses to interventions are to be documented. [s. 30. (2)]

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 ensuring that the resident's responses to interventions are documented, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 131. Administration of drugs



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

Specifically failed to comply with the following:

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

Findings/Faits saillants:

1. Record review with Registered Practical Nurse revealed resident's medications were not administered in accordance with the directions as prescribed by the doctor.

Director of Care confirmed her expectation that residents are administered medications in accordance with the directions for use specified by the prescriber. [s. 131. (2)]

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 ensuring that resident's medications are administered in accordance with the directions for use specified by the prescriber, to be implemented voluntarily.

Issued on this 18th day of June, 2013

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

Bonne Machloadd