

Ministry of Health and Long-Term Care

Inspection Report under the Long-Term Care Homes Act, 2007 Ministére de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

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 Sudbury Service Area Office 159 Cedar Street, Suite 603 SUDBURY, ON, P3E-6A5 Telephone: (705) 564-3130 Facsimile: (705) 564-3133 Bureau régional de services de Sudbury 159, rue Cedar, Bureau 603 SUDBURY, ON, P3E-6A5 Téléphone: (705) 564-3130 Télécopieur: (705) 564-3133

Public Copy/Copie du public

Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Nov 2, 3, 9, 10, 14, 2011	2011_099188_0029	Complaint

Licensee/Titulaire de permis

MANITOULIN CENTENNIAL MANOR HOME FOR THE AGED BOARD OF MANAGEMENT 70 Robinson Street, Postal Bag 460, LITTLE CURRENT, ON, P0P-1K0

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

MANITOULIN CENTENNIAL MANOR HOME FOR THE AGED 70 ROBINSON STREET, POSTAL BAG 460, LITTLE CURRENT, ON, P0P-1K0

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

MELISSA CHISHOLM (188)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with registered nursing staff, personal support workers, the resident identified in the complaint letter

During the course of the inspection, the inspector(s) conducted a walk through of resident care areas, observed interactions between staff residents and reviewed the health care records

The following Inspection Protocols were used during this inspection:

**Continence Care and Bowel Management** 

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 - Ordre de conformité
WAO – Work and Activity Order	WAO – Ordres ; travaux et activités



Ministry of Health and Long-Term Care

Inspection Report under the Long-Term Care Homes Act, 2007 Ministére de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

Non-compliance with requirements under the Long-Term Care	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
LTCHA includes the requirements contained in the items listed in	loi comprend les exigences qui font partie des éléments énumérés
	dans la définition de « exigence prévue par la présente loi », au
of the LTCHA.)	paragraphe 2(1) de la LFSLD.
	Ce qui suit constitue un avis écrit de non-respect aux termes du
under paragraph 1 of section 152 of the LTCHA.	paragraphe 1 de l'article 152 de la LFSLD.
	A Clarke and a second

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 51. Continence care and bowel management Specifically failed to comply with the following subsections:

s. 51. (2) Every licensee of a long-term care home shall ensure that,

(a) each resident who is incontinent receives an assessment that includes identification of causal factors, patterns, type of incontinence and potential to restore function with specific interventions, and that where the condition or circumstances of the resident require, an assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for assessment of incontinence;

(b) each resident who is incontinent has an individualized plan, as part of his or her plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented;
(c) each resident who is unable to toilet independently some or all of the time receives assistance from staff to manage and maintain continence;

(d) each resident who is incontinent and has been assessed as being potentially continent or continent some of the time receives the assistance and support from staff to become continent or continent some of the time;

(e) continence care products are not used as an alternative to providing assistance to a person to toilet;

(f) there are a range of continence care products available and accessible to residents and staff at all times, and in sufficient quantities for all required changes;

(g) residents who require continence care products have sufficient changes to remain clean, dry and comfortable; and

(h) residents are provided with a range of continence care products that,

(i) are based on their individual assessed needs,

(ii) properly fit the residents,

(iii) promote resident comfort, ease of use, dignity and good skin integrity,

(iv) promote continued independence wherever possible, and

(v) are appropriate for the time of day, and for the individual resident's type of incontinence. O. Reg. 79/10, s. 51 (2).

## Findings/Faits saillants :

1. Inspector reviewed the plan of care for an incontinent resident. Inspector noted the care plan identified a specific toileting plan. Inspector observed this toileting plan was not implemented. The licensee failed to ensure that a resident who is incontinent and has an individualized plan to promote continence has that plan implemented. [O.Reg. 79/10, s.51 (2)(b)]

Issued on this 14th day of November, 2011



Ministry of Health and Long-Term Care

Inspection Report under the Long-Term Care Homes Act, 2007 Ministére de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

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

ĮĮ