



**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  
performance et de la conformité**

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**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Sep 9, 2013	2013_229213_0029	L-000541-13 L-000599-13	Critical Incident System

**Licensee/Titulaire de permis**

**TRI-COUNTY MENNONITE HOMES  
200 Boullee St., New Hamburg, ON, N3A-2K4**

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

**NITHVIEW HOME  
200 Boullee Street, New Hamburg, ON, N3A-2K4**

**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs  
RHONDA KUKOLY (213)**

**Inspection Summary/Résumé de l'inspection**



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**The purpose of this inspection was to conduct a Critical Incident System inspection.**

**This inspection was conducted on the following date(s): August 29 & 30, 2013**

**This inspection was completed related to 3 critical incidents:**

**L-000541-13 critical incident #0547-000021-13**

**L-000597-13 critical incident #0547-000026-13**

**L-000599-13 critical incident #0547-000025-13**

**During the course of the inspection, the inspector(s) spoke with the administrator, 2 Registered Nurses, 2 Registered Practical Nurses and 2 Personal Support Workers**

**During the course of the inspection, the inspector(s) made observations and reviewed health records, policies and other relevant documentation**

**The following Inspection Protocols were used during this inspection:**

**Falls Prevention**

**Pain**

**Findings of Non-Compliance were found during this inspection.**

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**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



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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.)

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.

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

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**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 52. Pain management**

**Specifically failed to comply with the following:**

**s. 52. (2) Every licensee of a long-term care home shall ensure that when a resident's pain is not relieved by initial interventions, the resident is assessed using a clinically appropriate assessment instrument specifically designed for this purpose. O. Reg. 79/10, s. 52 (2).**

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**Findings/Faits saillants :**

1. The home failed to ensure the resident was assessed using a clinically appropriate assessment instrument when the resident's pain was not relieved by initial interventions as evidenced by:

1. A pain assessment was not completed following an incident that affected a resident's pain.
  2. The Administrator confirmed that it is an expectation that a pain assessment is completed and the plan of care updated following a change in condition affecting pain; she confirmed that a pain assessment had not been completed and the plan of care had not been updated relating to pain for a resident.[s. 52. (2)]
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Issued on this 11th day of September, 2013

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

Rhonda Kukoly