



**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 prévue  
sous la Loi de 2007 sur les foyers  
de soins de longue durée**

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**

**Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée**

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**Public Copy/Copie du public**

| <b>Report Date(s) /<br/>Date(s) du Rapport</b> | <b>Inspection No /<br/>No de l'inspection</b> | <b>Log # /<br/>No de registre</b> | <b>Type of Inspection /<br/>Genre d'inspection</b> |
|------------------------------------------------|-----------------------------------------------|-----------------------------------|----------------------------------------------------|
| Dec 5, 2018                                    | 2018_263524_0020                              | 009702-18                         | Complaint                                          |

**Licensee/Titulaire de permis**

peopleCare Inc.  
735 Bridge Street West WATERLOO ON N2V 2H1

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

peopleCare Tavistock  
28 William Street North P.O. Box 460 Tavistock ON N0B 2R0

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

INA REYNOLDS (524)

**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): December 3, 2018.**

**The following intakes were inspected concurrently during this inspection:**

**Log #009702-18 / IL-56912-LO related to personal care**

**Log #010043-18 / CIS #2614-000005-18 related to personal care.**

**During the course of the inspection, the inspector(s) spoke with the Executive Director, the Director of Nursing Care, one personal support worker, one resident and a family member.**

**Inspector also observed resident care provision, resident and staff interaction, reviewed resident's clinical records and relevant policies and procedures related to this inspection.**

**The following Inspection Protocols were used during this inspection:  
Skin and Wound Care**

**During the course of this inspection, Non-Compliances were issued.**

**1 WN(s)**

**1 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**

**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

|                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Legend</b><br><br>WN – Written Notification<br>VPC – Voluntary Plan of Correction<br>DR – Director Referral<br>CO – Compliance Order<br>WAO – Work and Activity Order                                                                                                                                                                                                                       | <b>Légende</b><br><br>WN – Avis écrit<br>VPC – Plan de redressement volontaire<br>DR – Aiguillage au directeur<br>CO – Ordre de conformité<br>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).<br><br>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.<br><br>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 O.Reg 79/10, s. 26. Plan of care**  
**Specifically failed to comply with the following:**

**s. 26. (3) A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident:**  
**11. Seasonal risk relating to hot weather. O. Reg. 79/10, s. 26 (3).**

**Findings/Faits saillants :**



1. The licensee has failed to ensure that a plan of care was based on, at a minimum, an interdisciplinary assessment of the following with respect to the resident: 11. Seasonal risk related to hot weather.

This inspection was initiated as a result of a complaint submitted to the Ministry of Health and Long-Term Care (MOHLTC) on a specific date, and a Critical Incident System report submitted by the home, regarding outdoor care concerns for an identified resident on a specific date.

During a conversation with the resident's family member on a specific date, they said that the resident was placed outside, in a certain location for a specific period of time on an identified date resulting in an injury. The family member wished the resident to continue to be outdoors.

Record review of the plan of care for the resident on Point Click Care for a specific date, prior to the incident, showed there was no focus statement, goals or interventions with respect to the resident's seasonal risk related to hot weather or safety needs while outdoors.

A Personal Support Worker (PSW) verified that the resident was dependent on staff for their personal care needs and locomotion off the unit related to their diagnosis. The PSW said they would look in the care plan and kardex for directions related to the resident's outdoor activities and safety needs.

Staff interview with the Director of Nursing Care (DONC), acknowledged the absence of a seasonal risk related to hot weather focus in the plan of care with goals and interventions. The DONC said that the plan of care was updated after the incident with the goal of ensuring the resident remains safe while outside and said that specific tasks were assigned to the PSWs on Point of Care.

The licensee has failed to ensure that a plan of care was based on, at a minimum, an interdisciplinary assessment of the following with respect to the resident: 11. Seasonal risk related to hot weather. [s. 26. (3) 11.]



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***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 a plan of care is based on, at a minimum, an interdisciplinary assessment of the following with respect to the resident: 11. Seasonal risk relating to hot weather, to be implemented voluntarily.***

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Issued on this 5th day of December, 2018

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

**Original report signed by the inspector.**