

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 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

Date(s) of inspection/Date(s) de

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Type of inspection/Gopra

## Public Copy/Copie du public

i'inspection	inspection No. No de l'inspection	d'inspection
Sep 4, 6, 10, 12, 2012	2012_051106_0023	Critical Incident
Licensee/Titulaire de permis		
RIVERSIDE HEALTH CARE FACILIT  110 VICTORIA AVENUE, FORT FRA  Long-Term Care Home/Foyer de so	NCES, ON, P9A-2B7	
RAINY RIVER HEALTH CENTRE 114 FOURTH STREET, P.O. BOX 23	6, RAINY RIVER, ON, POW-1L0	
Name of inspector(s)/Nom de l'insp	ecteur ou des inspecteurs	
MARGOT BURNS-PROUTY (106)		
i	rspection Summary/Résumé de l'inspe	ection

ineraction No/No de l'ineraction

The purpose of this inspection was to conduct a Critical incident inspection.

During the course of the inspection, the inspector(s) spoke with Director of Care (DOC), Registered Practical Nurses (RPN), Residents.

During the course of the inspection, the inspector(s) conducted a waik-through of resident home areas and various common areas, observed care provided to residents in the home, reviewed resident health care records.

The following Inspection Protocols were used during this inspection: Responsive Behaviours

Findings of Non-Compilance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES		
Legend	Legendé	
WN - Written Notification	WN - Avis écrit	
VPC – Voluntary Plan of Correction DR – Director Referral	VPC – Plan de redressement volontaire 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 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 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 paragraphe 2(1) de la LFSLD.

> 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 falled to comply with O.Reg 79/10, s. 53. Responsive behaviours Specifically failed to comply with the following subsections:

## s. 53. (3) The licensee shall ensure that,

- (a) the matters referred to in subsection (1) are developed and implemented in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices;
- (b) at least annually, the matters referred to in subsection (1) are evaluated and updated in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices; and
- (c) a written record is kept relating to each evaluation under clause (b) that includes the date of the evaluation, the names of the persons who participated in the evaluation, a summary of the changes made and the date that those changes were implemented. O. Reg. 79/10, s. 53 (3).

## Findings/Faits saillants:

1. On September 6, 2012, staff member #S-100, reported to inspector 106, that the home does not currently meet the requirements of O. Reg. 79/10, s. 53 (1) 1, 2, 3, and 4. The licensee failed to ensure that a responsive behaviours program, as referred to in O. Reg. 79/10, s. 53 (1), was developed and implemented in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices. [O. Reg. 79/10, s. 53 (3) (a)] (106)

## 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 responsive behaviours program, as referred to in O. Reg. 79/10, s. 53 (1), is developed and implemented in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices, to be implemented voluntarily.

Issued on this 12th day of September, 2012

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

