



**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**

**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) / 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>
Mar 29, 2017	2017_603194_0011	019774-16, 035445-16	Complaint

**Licensee/Titulaire de permis**

Omni Health Care Limited Partnership on behalf of 0760444 B.C. Ltd. as General Partner  
2020 Fisher Drive Suite 1 PETERBOROUGH ON K9J 6X6

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

SPRINGDALE COUNTRY MANOR  
2698 CLIFFORD LINE R. R. #5 PETERBOROUGH ON K9J 6X6

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

CHANTAL LAFRENIERE (194)

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



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

**This inspection was conducted on the following date(s): March 27, 28 and 29, 2017**

**Inspector completed the following complaint inspections; Log # 019774-16 and #035445-16 related to not having a Registered Nurse on duty in the building and #004167-17 related to pest control.**

**During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care(DOC), Environmental Services Manager (ESM), Maintenance, Registered Nurse (RN), Registered Practical Nurse (RPN), Personal Support Worker (PSW) and Resident. Also reviewed identified resident clinical health records, relevant policies, Registered Nursing staffing records, Maintenance logs, Maintenance On-call logs, Laundry quotas and Pest control records. Observed linen supplies available in the home and identified resident rooms.**

**The following Inspection Protocols were used during this inspection:**  
**Accommodation Services - Maintenance**  
**Infection Prevention and Control**  
**Skin and Wound Care**  
**Sufficient Staffing**

**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**

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
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 8. Nursing and personal support services**

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

**s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).**

**Findings/Faits saillants :**



1. The licensee has failed to ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times.

An interview was conducted by inspector #194 on March 28, 2017 with DOC to review the Registered Nursing (RN) staffing in the home. During the interview it was noted that the following days, a registered nurse who was an employee of licensee and a member of the regular nursing staff was not present and on duty at the home.

- June 27, 2016 did not have an RN in the building of an 8 hour shift from 1500 - 2300 hours.
- December 30, 2016 did not have an RN in the building for an 8 hour shift from 1500 -2300 hours
- December 31, 2016 did not have an RN in the building for an 8 hour shift from 1500 -2300 hours
- January 01, 2017 did not have an RN in the building for an 8 hour shift from 1500 -2300 hours
- January 02, 2017 did not have an RN in the building for an 8 hour shift from 1500 -2300 hours
- January 10, 2017 did not have an RN in the building for an 8 hour shift from 1500 -2300 hours

During the same interview with inspector # 194, DOC has indicated that the reason for the identified shifts not being staffed by Registered Nursing were not related to an emergency. [s. 8. (3)]

***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 by ensuring that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times., to be implemented voluntarily.***



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**Issued on this 29th day of March, 2017**

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

**Original report signed by the inspector.**