



**Inspection Report
under the *Long-Term
Care Homes Act, 2007***

**Rapport d'inspection
prévue la *Loi de 2007
les foyers de soins de
longue durée***

Ministry of Health and Long-Term Care

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

Ottawa Service Area Office
347 Preston St., 4th Floor
Ottawa ON K1S 3J4

Bureau régional de services d'Ottawa
347, rue Preston, 4^{ième} étage
Ottawa ON K1S 3J4

**Ministère de la Santé et des Soins de
longue durée**

Division de la responsabilisation et de la performance du
système de santé

Telephone: 613-569-5602
Facsimile: 613-569-9670

Téléphone: 613-569-5602
Télécopieur: 613-569-9670

Direction de l'amélioration de la performance et de la
conformité

Licensee Copy/Copie du Titulaire Public
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Date(s) of inspection/Date de l'inspection October 13, 2010	Inspection No/ d'inspection 2010_134_8565_12Oct161947	Type of Inspection/Genre d'inspection Log # O-002396 (Follow-up to Inspection log # O-001726)
Licensee/Titulaire Religious Hospitalers of St Joseph of Cornwall, Ontario 14 York Street Cornwall, On K6J 5T2 Fax: 613-933-0163		
Long-Term Care Home/Foyer de soins de longue durée St Joseph's Continuing Care Centre 14 York Street Cornwall, On K6J 5T2 Fax: 613-933-0163		
Name of Inspector(s)/Nom de l'inspecteur(s) Colette Asselin # 134		



Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a follow-up to the inspection of a critical incident CIS # C565-000009-10, conducted September 24 and 27, 2010.

During the course of the inspection, the inspector spoke with two Resident Care Aids, the unit Registered Practical Nurse, the Environmental Manager, the Director of Nursing, and the Administrator,

During the course of the inspection, the inspector reviewed several Health Records and restraint monitoring flow sheets, did a walkabout and visited several residents using new compact front release restraints.

The following Inspection Protocols were used during this inspection:

1. Minimizing Restraint

Findings of Non-Compliance were found during this inspection. The following action was taken:

- 1 WN
- 1 VPC

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

- WN** – Written Notifications/Avis écrit
- VPC** – Voluntary Plan of Correction/Plan de redressement volontaire
- DR** – Director Referral/Régisseur envoyé
- CO** – Compliance Order/Ordres de conformité
- WAO** – Work and Activity Order/Ordres: travaux et activités

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

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.)

- WN #1:** The Licensee has failed to comply with: LTCHA, 2007, S.O. 2007, c.8, s. 6. (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,
- (a) the planned care for the resident;
 - (b) the goals the care is intended to achieve; and
 - (c) clear directions to staff and others who provide direct care to the resident.



(11) When a resident is reassessed and the plan of care reviewed and revised,
(b) if the plan of care is being revised because care set out in the plan has not been effective, the licensee shall ensure that different approaches are considered in the revision of the plan of care.

Findings:

1. One resident's care plan has an entry indicating a risk of falls and requiring assistance of two people with toileting and transferring.
2. On October 13, 2010, it was noted that this resident was at risk of falls when transferring self from chair to bed. The new restraint was being released by the resident without staff's awareness.
3. On October 13, 2010, the resident's electronic care plan had not been updated to indicate the change in restraint order of September 28, 2010
4. The care plan does not address the safety risks and measures to be used to prevent falls or other safety risks.
5. There are no alternate safety measures in place during the day to alert staff when the resident attempts to get out of chair to transfer self.

Inspector ID #: # 134

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 meeting the requirement that the residents' plans of care provide clear direction to staff as it relates to safety risk, type of restraint to be used, care of indwelling catheter and updated when the residents' care needs change, to be implemented voluntarily.

CORRECTED NON-COMPLIANCE
Non-respects à Corrigé

REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	ACTION/ORDER #	INSPECTION REPORT #	INSPECTOR ID #
O. Reg. 79/10, s.112	CO	# 001	# 2010_134_8565_24Sep123912	# 126
O. Reg. 79/10 s.110 (2)	CO	# 002	# 2010_134_8565_24Sep123912	#126

Signature of Licensee or Representative of Licensee
Signature du Titulaire du représentant désigné

Signature of Health System Accountability and Performance Division representative/Signature (de la représentante de la Division de la responsabilisation et de la performance du système de santé.

Title:

Date:

Date of Report: November 17, 2010