

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 Sudbury Service Area Office 159 Cedar Street Suite 403 SUDBURY ON P3E 6A5 Telephone: (705) 564-3130 Facsimile: (705) 564-3133 Bureau régional de services de Sudbury 159 rue Cedar Bureau 403 SUDBURY ON P3E 6A5 Téléphone: (705) 564-3130 Télécopieur: (705) 564-3133

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	Inspection No /	Log # /	Type of Inspection /
	No de l'inspection	Registre no	Genre d'inspection
Sep 2, 2016	2016_320612_0016	005818-16	Complaint

Licensee/Titulaire de permis

ST. JOSEPH'S HEALTH CENTRE OF SUDBURY 1140 South Bay Road SUDBURY ON P3E 0B6

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

ST. JOSEPH'S VILLA, SUDBURY 1250 South Bay Road SUDBURY ON P3E 6L9

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

SARAH CHARETTE (612)

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): June 15 to 17, 2016.

The Inspectors reviewed a complaint related to nutrition and hydration and a complaint related to staff sleeping on night shift.

A Critical Incident Inspection #2016_320612_0015 was conducted concurrently with this inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Assistance Director of Care (ADOC), Registered Nurses (RNs), Registered Practical Nurses (RPNs), Personal Support Workers (PSWs), Food Service Manager (FSM), residents and their family members.

The Inspector conducted a daily walk through of resident areas, observed the provision of care towards residents, observed staff to residents interactions, reviewed residents' health care records, staffing schedules, and policies, procedures and programs.

The following Inspection Protocols were used during this inspection: Nutrition and Hydration Sufficient Staffing

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

1 WN(s) 0 VPC(s) 0 CO(s) 0 DR(s) 0 WAO(s)



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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		
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.		

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care

Specifically failed to comply with the following:

s. 6. (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when, (a) a goal in the plan is met; 2007, c. 8, s. 6 (10).

(b) the resident's care needs change or care set out in the plan is no longer necessary; or 2007, c. 8, s. 6 (10).

(c) care set out in the plan has not been effective. 2007, c. 8, s. 6 (10).



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Findings/Faits saillants :

1. The licensee has failed to ensure that the resident was reassessed and the plan of care reviewed and revised at least every six months and at any other time when the resident's care needs changed or care set out in the plan of care was no longer necessary.

Inspector #612 reviewed a complaint received by the Director, related to resident #005's nutrition and hydration. The Inspector observed resident #004 during a meal service on June 15, 16, and 17, 2016. During all three meal services, the Inspector observed that the resident was seated a specific way and that the staff fed the resident a specific way.

The Inspector reviewed the residents most recent care plan which stated that the resident should be seated a different way, utilizing a specific adaptive aid and fed by staff in a different way then observed.

The Inspector interviewed PSW #115, RPN #114 and RN #109. PSW #115 reported that they usually assisted the resident during meals, however they were not feeding the resident during the Inspectors observations. All three staff members confirmed that staff had been feeding the resident the way the Inspector observed for a while now. They stated that the resident had not used the specific adaptive aid for a while. RN #109 stated that the care plan should have been updated to reflect the change in the resident's care needs.

The Inspector interviewed the Food Services Manager, they stated that the staff should have been following the interventions as listed in the residents care plan and they were not aware if the resident had been reassessed or their care needs had changed.

During an interview with the DOC, they stated that it was the responsibility of the registered staff to update the residents care plan when the resident's care needs have changed.

No further action will be taken in regards to this non-compliance as their is an outstanding compliance order #006 from Resident Quality Inspection (RQI) #2016_264609_0007 with a compliance date of July 31, 2016. [s. 6. (10) (b)]



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Issued on this 6th day of September, 2016

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

Original report signed by the inspector.