



**Ministry of Health and
Long-Term Care**

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

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

**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**

Ottawa Service Area Office
347 Preston St Suite 420
OTTAWA ON K1S 3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347 rue Preston bureau 420
OTTAWA ON K1S 3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

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Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Nov 8, 2017	2017_702197_0005	022691-17	Follow up

Licensee/Titulaire de permis

The Corporations of the United Counties of Leeds and Grenville, the City of Brockville, the Town of Gananoque and the Town of Prescott
c/o St. Lawrence Lodge 1803 County Road 2 BROCKVILLE ON K6V 5T1

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

ST. LAWRENCE LODGE
1803 County Road, #2 East Postal Bag #1130 BROCKVILLE ON K6V 5T1

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

JESSICA PATTISON (197)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): October 20, 23-26, 2017

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care (DOC), an Assistant Director of Care (ADOC), Registered Nurses, Registered Practical Nurses and Personal Support Workers.

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



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)**

The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 68. (2)	CO #001	2017_664602_0025		197

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 O.Reg 79/10, s. 8. Policies, etc., to be followed, and records

Specifically failed to comply with the following:

s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,

(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).

(b) is complied with. O. Reg. 79/10, s. 8 (1).



Findings/Faits saillants :

1. The licensee has failed to comply with O. Reg. 79/10, s. 8(1)(b) in that the home's procedure to monitor resident's food and fluid intake is not being followed by staff.

O. Reg. 79/10, s. 68(2)(d) requires that every licensee of a long-term care home shall ensure that the organized programs of nutrition care, hydration and dietary services include a system to monitor and evaluate the food and fluid intake of residents with identified risks related to nutrition and hydration.

The home uses a daily care flow sheet to document food and fluid intake for all residents. The home's policy titled Daily Care Flow Sheet #0401-03-52 last updated June 2017 instructs staff to do the following:

Days and Evenings -

Diet: Note percentage taken. Notify the Nurse-in-Charge if the resident ate less than 50% of their meal and provide a supplement drink. When a supplement is provided due to less than 50% of the meal taken, circle the amount taken and also write "supplement" in the appropriate meal square.

Fluids: Note percentage taken (100% = 2 cups fluid excluding tea and coffee)

The daily care flow sheets were reviewed for three residents for a specific time period and showed the following:

Resident #001 - 28% of intakes for both solids and fluids were not documented by staff.

Resident #002 - 35% of intakes for both solids and fluids were not documented by staff.

Resident #003 - 52% of intakes for both solids and fluids were not documented by staff.

One PSW on the first floor indicated that she always completes the daily care flow sheets because she is a long standing staff member and can complete them quickly. She indicated that other staff are not able to complete them because some days are just too busy.

A PSW on the second floor indicated that daily care flow sheets probably only get done about 25% of the time because it is so busy on that particular home area. She stated that there are constant interruptions when staff are trying to document before the end of the shift.

An RPN on the third floor indicated to the inspector that some days the PSW's are very



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busy and may not get the daily care flow sheets completed.

Two PSW's on the third floor indicated that they don't always have time to fill out the daily care flow sheets due to heavier work load on some home areas.

[s. 8. (1) (a),s. 8. (1) (b)]

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 the home's procedure to monitor resident's food and fluid intake is followed, to be implemented voluntarily.

Issued on this 8th day of November, 2017

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

Original report signed by the inspector.