



**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 prévue  
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**

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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Feb 12, 2019	2019_617148_0003	029696-18, 030700- 18, 032553-18	Complaint

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### **Licensee/Titulaire de permis**

St. Patrick's Home of Ottawa Inc.  
2865 Riverside Drive OTTAWA ON K1V 8N5

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

St. Patrick's Home  
2865 Riverside Drive OTTAWA ON K1V 8N5

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

AMANDA NIXON (148)

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## **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): January 11, 14-17, 21, 25 and 28, 2019**

**This inspection included three complaint logs: 029696-18 related to an incident that resulted in injury to an identified resident; 030700-18 and 032553-18 related to various care issues for an identified resident including missing clothing, falls prevention, continence care and the home's staffing plan.**

**During the course of the inspection, the inspector(s) spoke with the home's President and Chief Executive Officer, Vice President of Nursing, Assistant Vice President of Nursing, Manager of Volunteers and Recreation, Human Resources Manager, Registered Nurses, Registered Practical Nurses, Personal Support Workers (PSW), Recreologists, family members and residents.**

**In addition, the Inspector reviewed resident health care records, documents related to an identified incident whereby a resident sustained injury and documents related to the nursing department staffing plan. The Inspector observed resident care environments, resident care and staff to resident interactions.**

**The following Inspection Protocols were used during this inspection:**

**Accommodation Services - Laundry  
Continence Care and Bowel Management  
Falls Prevention  
Personal Support Services  
Recreation and Social Activities  
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)**



**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

Legend

WN – Written Notification  
VPC – Voluntary Plan of Correction  
DR – Director Referral  
CO – Compliance Order  
WAO – Work and Activity Order

Légende

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).

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 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 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. (7) The licensee shall ensure that the care set out in the plan of care is  
provided to the resident as specified in the plan. 2007, c. 8, s. 6 (7).**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that the care set out in the plan of care was provided to the resident as specified in the plan.

Resident #002 was identified by the plan of care to be at high risk of falls. As part of the interventions related to fall risk, the plan of care specifies that the resident was to have a bed alarm when in bed and a chair alarm applied while seated. On January 17, 2018, the Inspector observed resident #002 to be seated in a wheelchair with the chair alarm available for use but not attached to the resident's clothing. On January 22, 2018, at the breakfast meal service, the Inspector observed the resident to be seated in a wheelchair without an alarm applied to the chair. PSW #110, who had provided the resident with morning care, indicated that the alarm was not on the bed nor could the alarm be found in the resident's room.

The plan of care set out, related to the application of a bed/chair alarm, was not provided to resident #002 as specified in the plan. [s. 6. (7)]

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**Issued on this 12th day of February, 2019**

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

**Original report signed by the inspector.**