



**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**

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Public Copy/Copie du public

Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Jun 22, 2018	2018_728696_0002	028022-16	Complaint

Licensee/Titulaire de permis

Stayner Care Centre Inc.
c/o Jarlette Health Services 711 Yonge Street MIDLAND ON L4R 2E1

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

Stayner Care Centre
244 Main Street East, 7308 Highway #26, P.O. Box 350 STAYNER ON L0M 1S0

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

ZINNIA SHARMA (696)

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 13, 15, 18, and 20, 2018.

Complaint Log #028022-16 / IL-46806-TO related to nursing and personal support services and bathing.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care (DOC), Registered Nurses (RN), Registered Practical Nurses (RPNs), Personal Support Workers (PSWs), and residents.

During the course of the inspection the LTCH Inspector toured the home, observed resident care and services, reviewed relevant documents including but not limited to: clinical records, and the home's documentation and policies as related to the inspection, and interviewed staff and residents.

**The following Inspection Protocols were used during this inspection:
Personal Support Services
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	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 O.Reg 79/10, s. 33. Bathing
Specifically failed to comply with the following:**

s. 33. (1) Every licensee of a long-term care home shall ensure that each resident of the home is bathed, at a minimum, twice a week by the method of his or her choice and more frequently as determined by the resident's hygiene requirements, unless contraindicated by a medical condition. O. Reg. 79/10, s. 33 (1).

Findings/Faits saillants :



1. The licensee has failed to ensure that the resident was bathed, at a minimum, twice a week by the method of his or her choice, including tub baths, showers, and full body sponge baths, and more frequently as determined by the resident's hygiene requirements, unless contraindicated by a medical condition.

A complaint was submitted to the Ministry of Health and Long Term Care on a specific date by a resident, indicating that they did not receive their scheduled baths. During an interview with the Inspector, resident confirmed that they did not receive their shower for many days in September 2016.

The clinical record for the specific resident was reviewed and included the following documentation:

- The resident was scheduled to receive their shower/bath on two specific days every week.
- Resident's care record for September 2016, indicated that they were scheduled to receive their shower/bath on two specific dates in September but there was no documentation to indicate that the resident was offered a shower/bath during those days.
- The resident was bathed only once during the two specific weeks of September 2016. There was no documentation of refusal of a shower/bath by the resident or documentation to support that resident was offered a shower/bath a different day in their progress notes for the month of September 2016.

The home's policy titled "Resident Rights, Care and Services-Nursing and Personal Support Services-Bathing" dated September 16, 2013, stated that "each resident shall be bathed, twice weekly at minimum, taking into consideration the resident's preferred method of bathing." It also indicated that staff need to "document the provision and or refusal of resident bathing in keeping with the long term care home's set documentation standards."

In an interview with DOC, they told Inspector that the staff were expected to shower or bath residents at a minimum of twice a week. They stated that if a resident refused their bath then staff were required to document it on Point Click Care.

The home failed to ensure that the identified resident was bathed, at a minimum, twice a week in the month of September 2016.



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Issued on this 22nd day of June, 2018

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

Original report signed by the inspector.