

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

**Rapport d'inspection en vertu de
la Loi de 2007 sur les foyers de
soins de longue durée**

**Long-Term Care Operations Division
Long-Term Care Inspections Branch**

**Division des opérations relatives aux
soins de longue durée
Inspection de soins de longue durée**

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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
Jan 9, 2020	2020_563670_0002	023513-19	Complaint

Licensee/Titulaire de permis

Revera Long Term Care Inc.
5015 Spectrum Way, Suite 600 MISSISSAUGA ON L4W 0E4

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

Sumac Lodge
1464 Blackwell Road SARNIA ON N7S 5M4

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

DEBRA CHURCHER (670)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): January 6 and 7, 2020.

The purpose of this inspection was to inspect complaint Log# 023513-19 IL-72829-LO related to concerns regarding development of altered skin integrity and management of skin and wound.

During the course of the inspection, the inspector(s) spoke with the Executive Director, the Director of Care, the Nurse Manager, one Registered Practical Nurse Wound Care Champion, one Registered Practical Nurse Resident Assessment Instrument Coordinator, one Registered Practical Nurse and three Personal Support Workers.

During the course of this inspection the Inspector observed the overall maintenance and cleanliness of the home, observed staff to resident interactions, observed the provision of care, reviewed relevant internal documentation, reviewed relevant clinical records and reviewed relevant policies and procedures.

**The following Inspection Protocols were used during this inspection:
Hospitalization and Change in Condition
Personal Support Services
Skin and Wound Care**

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)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Légende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<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. 50. Skin and wound care

Specifically failed to comply with the following:

- s. 50. (2) Every licensee of a long-term care home shall ensure that,**
- (b) a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds,**
- (i) receives a skin assessment by a member of the registered nursing staff, using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment,**
 - (ii) receives immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required,**
 - (iii) is assessed by a registered dietitian who is a member of the staff of the home, and any changes made to the resident's plan of care relating to nutrition and hydration are implemented, and**
 - (iv) is reassessed at least weekly by a member of the registered nursing staff, if clinically indicated; O. Reg. 79/10, s. 50 (2).**

Findings/Faits saillants :

1. The licensee has failed to ensure that a resident #001 who was exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, received immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required.

The Ministry of Long-Term Care received a complaint, related to care concerns.

The home's policy titled LTC- Skin and Wound Care Program New Wound Care 12-O10.02, last reviewed March 31, 2019 stated that:

- Referrals as applicable: Physiotherapist
- POC tasks as indicated by cause of wound: Turning and repositioning
- Plan of Care: Updated with appropriate interventions.

A progress note and a specific assessment dated on a specific date , stated that resident #001 had developed multiple specific medical conditions.

Review of resident #001's plan of care showed that the resident was assessed as requiring a specific intervention at admission and no further assessments for the intervention or updates to the care plan were completed.

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During record review of resident #001's clinical record the Inspector was unable to locate a plan of care for resident #001 related to the specific medical conditions during the resident's admission. The Inspector located a plan of care related to the resident's specific medical conditions that was dated two days after the resident left the home.

An interview was conducted with Registered Practical Nurse Wound Care Champion (RPNWCC) #104, and they acknowledged that the resident had a specific condition upon admission and stated they would have expected that the resident would have had a related care plan and should have had a specific intervention implemented as soon as the specific condition was discovered.

RPNWCC #104 acknowledged that resident #001 had multiple specific medical conditions that were identified on a specific date. RPNWCC #104 acknowledged that a referral and assessment had not been completed, and the home continued to use an intervention that should have been discontinued or changed when the specific medical conditions were identified. RPNWCC #104 also acknowledged that there was no care plan implemented related to resident #001's multiple specific medical conditions until two days after the resident had left the home.

RPNWCC #104 also stated that it would have been the expectation that a referral would have been completed, resident #001's specific intervention should have been changed and a care plan related to the residents medical conditions should have been implemented.

An interview was conducted with Director of Care (DOC) #102 and they acknowledged that the home had not followed their policy titled LTC- Skin and Wound Care Program New Wound Care 12-O10.02 for resident #001.

The licensee has failed to ensure that a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, received immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required. [s. 50. (2) (b) (ii)]

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, (b) a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, receives immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required, to be implemented voluntarily.

Issued on this 9th day of January, 2020

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

Original report signed by the inspector.