



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 prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch
Division de la responsabilisation et de la performance du système de santé
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Table with 3 columns: Date(s) of Inspection, Inspection No, Type of Inspection. Row 1: Nov 9, 14, 17, 22, 2011; 2011_090172_0038; Complaint

Licensee/Titulaire de permis

REVERA LONG TERM CARE INC.
55 STANDISH COURT, 8TH FLOOR, MISSISSAUGA, ON, L5R-4B2

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

JOAN WOODLEY (172)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with the Executive Director, the Director of Care, 1 Registered Nurse, 1 Registered Practical Nurse, and the Registered Dietitian

During the course of the inspection, the inspector(s) held interviews, reviewed health care records and policies.

The following Inspection Protocols were used during this inspection:

Continence Care and Bowel Management

Medication

Nutrition and Hydration

Personal Support Services

Reporting and Complaints

Findings of Non-Compliance were found during this inspection.

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>Legendé</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 LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care
Specifically failed to comply with the following subsections:

s. 6. (4) The licensee shall ensure that the staff and others involved in the different aspects of care of the resident collaborate with each other,
(a) in the assessment of the resident so that their assessments are integrated and are consistent with and complement each other; and
(b) in the development and implementation of the plan of care so that the different aspects of care are integrated and are consistent with and complement each other. 2007, c. 8, s. 6 (4).

Findings/Faits saillants :

1. Record review of the Personal Support Worker/ Health Care Aide Skin Assessment (PSW/HCA Skin assessment) was not reflective of a change in resident's condition.
[LTCHA,2007, S.O. 2007, c.8, s.6.(4)(a)]
2. Review of Multidisciplinary Progress Notes revealed no documented Blood Pressure, Pulse, Respiration or Oxygen Saturation levels, yet the statement " Vital Signs stable" was written.
[LTCHA,2007, S.O. 2007, c.8, s.6.(4)(a)]
3. The Registered Dietitian's assessments and reassessments related to weight loss reference the PM and HS Supplement. No evidence was found to show any collaboration or integration of information by the Nursing staff with the Registered Dietitian with the multiple omissions in documenting consumption of the supplement ordered twice a day. Record Review of fluid and food intake records revealed no documentation for the entire month of the PM and HS supplement. Staff Interview with Registered Dietitian confirmed this was not unusual to find many omissions in recording fluid and food intake.
[LTCHA,2007, S.O. 2007, c.8, s.6.(4)(a)]
4. Record review revealed Personal Support Workers documented nine(9) loose stools, over a five(5) day period on the Daily Documentation Record. Review of the Medication Administration Record revealed the Registered Staff continued to administer Senekot, a stool softener, daily, during this time period. There was no evidence of integration of information or collaboration occurring between the Registered staff and the Personal Support Workers caring for this resident.
[LTCHA,2007, S.O. 2007, c.8, s.6.(4)(a)]



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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 be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 134. Residents' drug regimes

Every licensee of a long-term care home shall ensure that,

(a) when a resident is taking any drug or combination of drugs, including psychotropic drugs, there is monitoring and documentation of the resident's response and the effectiveness of the drugs appropriate to the risk level of the drugs;

(b) appropriate actions are taken in response to any medication incident involving a resident and any adverse drug reaction to a drug or combination of drugs, including psychotropic drugs; and

(c) there is, at least quarterly, a documented reassessment of each resident's drug regime. O. Reg. 79/10, s. 134.

Findings/Faits saillants :

1. Review of Medication Administration Record revealed Registered Staff did not complete an assessment prior to continuing to administer a medication.[O.Reg79/10,s.134.(a)]

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 be implemented voluntarily.

Issued on this 22nd day of November, 2011

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

Jean L. Hoodley .