

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

Rapport d'inspection prévue le *Loi de 2007 les foyers de soins de longue durée*

Ministry of Health and Long-Term Care

Health System Accountability and Performance Division Performance Improvement and Compliance Branch

Ministère de la Santé et des Soins de longue durée

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	Licensee Copy/Copie du Titulair	re Public Copy/Copie Public	
Date(s) of inspection/Date de l'inspection October 25, 2010	Inspection No/ d'inspection 2010_115_9579_25Oct110827 2010_135_9579_04Oct142815	Type of Inspection/Genre d'inspection Complaint L-01044	
Licensee/Titulaire Coorporation of the County of Essex, 360 Fairview Ave. West, Essex, ON., N8M 1Y6			
Long-Term Care Home/Foyer de soins de longue durée Sun Parlor Home for Senior Citizens, 175 Talbot Street East, Leamington, ON., N8H 1L9			
Name of Inspector(s)/Nom de l'inspecteur(s) Terri Daly #115, Bonnie MacDonald #135			
Inspection Summary/Sommaire d'inspection			
The purpose of this inspection was to conduct a complaint inspection.			
During the course of the inspection, the inspectors spoke with: the Administrator, DOC, ADOC, FSM, Dietitian 1 RN, 1 RPN, 1 PSW, family member and 1 resident.			
During the course of the inspection, the inspectors: reviewed the clinical notes for resident Home's menus, food production sheets and recipes.			
The following Inspection Protocols were used in part or in whole during this inspection: Dignity, Choice and Privacy Inspection Protocol Personal Support Services Inspection Protocol Medication Inspection Protocol Dining Observations Food Quality			
Findings of Non-Compliance were	e found during this inspection.	The following action was taken:	
5 WN 2 VPC			

Revisal for Publication.



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NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN - Written Notifications/Avis écrit :

VPC - Voluntary Plan of Correction/Plan de redressement volontaire

DR - Director Referral/Régisseur envoyé

CO - Compliance Order/Ordres de conformité

WAO - Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 suivent constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée,

Non-respect avec les exigences sur le Loi de 2007 les foyers de soins de longue durée à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has falled to comply with LTCHA, 2007, S.O.2007, c.8, s6(1)(c)
Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,

(c) clear directions to staff and others who provide direct care to the resident.

Findings:

1. The resident's wife/POA has requested to be called when her husband is agitated. She was not consistently called when he became agitated and not all staff were aware that she wanted to be called. The plan of care does not set out clear directions to staff that resident's POA/wife is to be called when resident becomes agitated.

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WN #2: The Licensee has falled to comply with O.Reg. 79/10, s.27(1)(a)

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

(a) a care conference of the interdisciplinary team providing a resident's care is held within six weeks following the resident's admission and at least annually after that to discuss the plan of care and any other matters of importance to the resident and his or her substitute decision-maker, if any;

Findings:

1. A care conference was held Aug. 23, 2010, six weeks after resident was admitted. The RN and the POA (wife) were the only attendees. The interdisciplinary team was not in attendance for the meeting.

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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 ensure participation of the interdisciplinary team at resident care conferences, to be implemented voluntarily.



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WN #3: The Licensee has failed to comply with O.Reg. 79/10, s.71(2)(b) The licensee shall ensure that each menu, (b) provides for a variety of foods, including fresh seasonal foods, each day from all food groups in keeping with Canada's Food Guide as it exists from time to time.			
	da's Food Guide i.e. bread was not	s not provide an adequate number of grain servings in offered or provided to residents Oct. 25/10 at lunch or	
Inspector ID #:	135		
WN #4: The Licensee has failed to comply with O.Reg. 79/10, s.71(4) The licensee shall ensure that the planned menu items are offered and available at each meal and snack.			
Findings: 1. October 25, 2010, in 1 west dining room; 7 residents (6 minced and 1 puree diet) were not offered choice of entrée at lunch as per the Homes' planned menu.			
Inspector ID #:	135		
WN #5: The Licensee has falled to comply with O.Reg. 79/10, s. 72(2)(c) The food production system must, at a minimum, provide for, (c) standardized recipes and production sheets for all menus;			
Findings: 1. October 25/10, 26/39 (66.6%) of the standardized recipes required for lunch and dinner menu were not available for staff to reference. Production sheets are not in use at the home for the present menu cycle.			
Inspector ID #:	nspector ID #: 135		
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, ensuring standardized recipes and production sheets for all menus are available to staff, to be implemented voluntarily.			
Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné		Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.	
Title:	Date:	Date of Report: (if different from date(s) of inspection).	