



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

Rapport d'inspection prévu 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

Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
conformité

Hamilton Service Area Office
119 King Street West, 11th Floor
Hamilton ON L8P 4Y7

Telephone: 905-546-8294
Facsimile: 905-546-8255

Bureau régional de services de Hamilton
119, rue King Ouest, 11th étage
Hamilton ON L8P 4Y7

Téléphone: 905-546-8294
Télécopieur: 905-546-8255

		<input type="checkbox"/> Licensee Copy/Copie du Titulaire	<input checked="" type="checkbox"/> Public Copy/Copie Public
Date(s) of inspection/Date de l'inspection November 4, 2010	Inspection No/ d'inspection 2010_146_2739_03Nov182424	Type of Inspection/Genre d'inspection Complaint H-01184	
Licensee/Titulaire MNC Lifecare Group Inc., c/o Ernst and Young Inc., 222 Bay Street, TD Centre, PO Box 251, Toronto, ON., M5K 1J7			
Long-Term Care Home/Foyer de soins de longue durée Townsview Lifecare Centre, 39 Mary Street, Hamilton, ON., L8R 3L8			
Name of Inspector(s)/Nom de l'inspecteur(s) Barbara Naykalyk-Hunt, #146			
Inspection Summary/Sommaire d'inspection			
The purpose of this inspection was to conduct a complaint inspection related to a resident post-fall assessment/action.			
During the course of the inspection, the inspector spoke with: the Administrator, the Director of Care, a registered staff and one resident.			
During the course of the inspection, the inspector: reviewed the resident's health file and met with the resident.			
The following Inspection Protocols were used during this inspection: Falls			
<input checked="" type="checkbox"/> Findings of Non-Compliance were found during this inspection. The following action was taken: 1 WN			

NON-COMPLIANCE / (Non-respectés)



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Definitions/Définitions

WN – Written Notifications/Avis écrit

VPC – Voluntary Plan of Correction/Plan de redressement volontaire

DR – Director Referral/Référance envoyée

CO – Compliance Order/Ordre de conformité

WAO – Work and Activity Order/Ordre: 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 suivant constitue 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 failed to comply with O. Reg. 79/10, s. 24(9)

(9)The licensee shall ensure that the resident is reassessed and the care plan is reviewed and revised when,
(c) the care set out in the plan has not been effective

Findings:

1. The resident was assessed by the staff nurse with pain, swelling, bruising and abrasions and inability to weight-bear from a reported fall. The re-assessments showed that the symptoms increased. The care provided was ineffective as evidenced by the increase in symptoms, but 24 hours after the initial assessment, the plan had not been revised to include a physician notification or a transfer to hospital. After 36 hours and a worsening of symptoms, the physician was notified of the injuries. The resident was sent to hospital.

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).