

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

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Inspection Report under the LTC Homes Act, 2007	Rapport d'inspection prevue de le Loi de 2007 les foyers de soins de			
□ Public Copy	longue durée ☐ Copie du Titulaire			
Licensee Copy	Copie de la Publique			
Date(s) of inspection/Date de l'inspection	Inspection No/	Type of Inspection/Genre d'insptection		
	d'inspection			
August 12, 2010	2010_159_2656_11Aug174945	Complaint		
Licensee/Titulaire	•			
Tyndall Nursing Home Limited				
1060 Eglinton Avenue East , Mississauga ON L4W 1K3				
Long-Term Care Home/Foyer de soins de longue durée				
Tyndall Nursing Home				
1060 Eglinton Avenue East, Mississauga ON L4W 1K3				
Name of Inspector(s)/Nom de l'inspecteur(s)		•		
Asha Sehgal Dietary				
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Inspection Summary/Sommaire d'inspection				
The purpose of this inspection was to conduct a complaint inspection				
The inspection occurred on August 12, 2010.				
During the course of the inspection, the inspector spoke with:				
Director Of Care, Registered Nurse.				
The following Inspection Protocols were used	in part or in whole during	this inspection:		
Nutrition and Hydration.				
4 Findings of Non-Compliance were found during this inspection. The following action was taken:				
4 WN		-		
4 VPC				
,				
,				



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

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 constituer un avis d'ecrit de l'exigences prevue le paragraph 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 prevue par la présente loi" au paragraphe 2(1) de la loi.

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN - Written Notifications/Avis écrit

VPC – Plan of correction/Plan de redressement

DR - Director Referral/Régisseur envoye

CO - Compliance Order/Ordres de conformité

WAO - Work and Acitvity Order/Ordres: travaux et activitiés

WN#1: The Licensee has failed to comply with: LTCA, 2007, S.O. 2007, s.6(4)(a)

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

Findings:

1. A review of resident's health records (progress notes) indicated that in July 2010, the resident had unusual symptoms and refusing food and fluids. The resident was noted in the progress notes to be lethargic. There was no documentation to support that a significant decline in the hydration status of the resident was communicated and referred to the Registered Dietitian and the physician for assessment to address concerns related to dehydration.

VPC-Pursuant to LTCA, 2007, S. O. 2007, c. 8, s. 152(2) the licensee is here by requested to prepare a written plan of correction for achieving compliance with ensuring that staff and others involved in the care of the resident collaborate with each other to be implemented voluntarily.

INSPECTOR ID# - 159

WN#2: The Licensee has failed to comply with: LTCA, 2007, S.O. 2007, s. 6(11)(b)

When a resident is reassessed and the plan of care reviewed and revised, if the plan of care is being revised because care set out in the plan has not been effective, the licensee shall ensure that different approaches are considered in the revision of the plan of care. 2007, c. 8, s. 6 (11).

Findings:

1 In the medical administrative record it was documented that an identified resident refused supplement and protein powder 9 occasions in July 2010. Response to oral nutritional supplements was not evaluated, nutritional needs not revisited and different approaches were not taken. The plan of care was not revised based on the resident's response and needs.

VPC-Pursuant to LTCA, 2007, S. O. 2007, c. 8, s. 152(2) the licensee is here by requested to prepare a written plan of correction for achieving compliance with ensuring when a resident is reassessed and the plan of care reviewed and revised because care set out in the plan has not been effective to be implemented voluntarily.

Inspector ID#: 159



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

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 constituer un avis d'ecrit de l'exigences prevue le paragraph 1 de section 152 de les foyers de soins de longue dureé.

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

WN#3: The Licensee has failed to comply with: O. Reg. 79/10, s..26(3)14

A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident: Hydration status and any risks relating to hydration.

Findings:

An identified resident's plan of care was not based on an interdisciplinary assessment of hydration status and risk related to hydration. Goals and objectives to meet resident's hydration needs were not noted in the plan of care. Abnormal lab results of the resident were not assessed by the dietitian and addressed on the plan of care.

VPC-Pursuant to LTCA, 2007, S. O. 2007, c. 8, s. 152(2) the licensee is here by requested to prepare a written plan of correction for achieving compliance with ensuring a plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident: Hydration status and any risks relating to hydration to be implemented voluntarily. Inspector ID#: 159

WN#4: The Licensee has failed to comply with: O.Reg..79/10, s. 26(4) (a) (b)

The licensee shall ensure that a registered dietitian who is a member of the staff of the home, completes a nutritional assessment for all residents on admission and whenever there is a significant change in a resident's health condition.

The licensee shall ensure that a registered dietitian who is the member of the staff of the home, assesses the matters referred to in paragraph 13 and 14 of subsection (3).

Findings:

- A review of the food and fluid intake record of the resident indicated that the resident was taking fluids poorly and refused meals four days in July 2010. No notes were noted in the Dietary Referral/communication book or in the progress notes indicating that the information related to significant change in resident's health condition was referred to the dietitian. The resident did not receive nutritional assessment by the Registered Dietitian.
- 2 The resident was assessed in June 2010 by the Registered Dietitian. The Annual Assessment (Nutritional assessment) completed by the dietitian did not include an assessment of the resident's hydration, an evaluation of the quantity of nutritional supplement ordered in relation to the resident's intake and requirements or discussion with the resident's substitute decision maker in resident's needs and wishes.
- 3 The nutritional assessment of identified resident completed by the Registered Dietitian did not include estimation of calories, protein, fluid and micronutrient needs of the resident.

VPC-Pursuant to LTCA, 2007, S. O. 2007, c. 8, s. 152(2) the licensee is here by requested to prepare a written plan of correction for achieving compliance with ensuring that a registered dietitian who is a member of the staff of the home, completes a nutritional assessment for all residents on admission and whenever there is a significant change in a resident's health condition to be implemented voluntarily.



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

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 constituer un avis d'ecrit de l'exigences prevue le paragraph 1 de section 152 de les foyers de soins de longue duréé

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

Inspector ID#: 159		
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Signature of Licensee of I Signature du Titulaire du	Designated Representative 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.
		186 Selge
Title:	Date:	Date of Report (if different from date(s) of inspection).