



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
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, 11ième étage
HAMILTON, ON, L8P-4Y7
Téléphone: (905) 546-8294
Télécopieur: (905) 546-8255

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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: May 3, 24, 2011; 2011\_027192\_0011; 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
GARDEN CITY MANOR
168 Scott Street, St. Catharines, ON, L2N-1H2

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs
DEBORA SAVILLE (192)

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 Director of Care, Registered Nurse (RN), Registered Practical Nurse (RPN), Personal Support Workers (PSW) and residents.

During the course of the inspection, the inspector(s) reviewed medical records and policy and procedure.

The following Inspection Protocols were used in part or in whole during this inspection:
Skin and Wound Care

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Table with 2 columns: Definitions (English) and Définitions (French). Rows include WN, VPC, DR, CO, WAO.



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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.)

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

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.

Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

**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. (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan. 2007, c. 8, s. 6 (7).**

**Findings/Faits sayants :**

1. A specified resident did not receive care as specified in the plan of care. The plan of care and Treatment Administration Record indicate that the resident was to have a treatment assessment completed weekly. There are no signatures indicating that an assessment was completed on the April 2011 Treatment Administration Record (TAR), or on the back of the TAR as indicated in the plan of care. There is no indication of treatment assessment documented in the progress notes for the month of April 2011. A specified resident was to receive specified treatments. The Treatment Administration Record for April 2011 indicates that the resident received this treatment 3/9 times during the month.

**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 that the care set out in the plan of care is provided to the resident as specified in the plan of care, to be implemented voluntarily.**

**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 50. Skin and wound care**  
Specifically failed to comply with the following subsections:

**s. 50. (2) Every licensee of a long-term care home shall ensure that,**  
(a) a resident at risk of altered skin integrity receives a skin assessment by a member of the registered nursing staff,  
(i) within 24 hours of the resident's admission,  
(ii) upon any return of the resident from hospital, and  
(iii) upon any return of the resident from an absence of greater than 24 hours;  
(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;  
(c) the equipment, supplies, devices and positioning aids referred to in subsection (1) are readily available at the home as required to relieve pressure, treat pressure ulcers, skin tears or wounds and promote healing; and  
(d) any resident who is dependent on staff for repositioning is repositioned every two hours or more frequently as required depending upon the resident's condition and tolerance of tissue load, except that a resident shall only be repositioned while asleep if clinically indicated. O. Reg. 79/10, s. 50 (2).

**Findings/Faits sayants :**



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1. A specified resident was not assessed by a member of the registered nursing staff weekly through the month of April 2011. Weekly treatment assessments are designated on the Treatment Administration Record (TAR) as being required. No signatures are present on the TAR. No assessment findings are documented on the back of the Medication Administration Record. No assessments were documented in the progress notes for the month of April 2011. Discussion with the Director of Care confirms that assessments should be recorded on the back of the Treatment Administration Record or on the progress notes.

***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 that every resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, is reassessed at least weekly by a member of the registered nursing staff, if clinically indicated, to be implemented voluntarily.***

Issued on this 3rd day of June, 2011

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

*Deborah Saville, Nursing Inspector*