



**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 sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**

**Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée**

Toronto Service Area Office  
5700 Yonge Street 5th Floor  
TORONTO ON M2M 4K5  
Telephone: (416) 325-9660  
Facsimile: (416) 327-4486

Bureau régional de services de  
Toronto  
5700 rue Yonge 5e étage  
TORONTO ON M2M 4K5  
Téléphone: (416) 325-9660  
Télécopieur: (416) 327-4486

**Public Copy/Copie du public**

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<b>Report Date(s) / Date(s) du rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Nov 16, 2017	2017_644507_0014	013715-17	Complaint

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**Licensee/Titulaire de permis**

VILLA COLOMBO SENIORS CENTRE (VAUGHAN) INC.  
10443 HIGHWAY 27, KLEINBURG VAUGHAN ON L0J 1C0

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**Long-Term Care Home/Foyer de soins de longue durée**

VILLA COLOMBO SENIORS CENTRE  
10443 HIGHWAY 27, KLEINBURG VAUGHAN ON L0J 1C0

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**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs**

STELLA NG (507), ADAM DICKEY (643)

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**Inspection Summary/Résumé de l'inspection**

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

**This inspection was conducted on the following date(s): October 16 - 20, 23 -27, and 30 - 31, 2017.**

**This complaint inspection was inspected in relation to the following complaints:**

- 1) Residents' Bill of Rights,**
- 2) skin and wound care management,**
- 3) plan of care,**
- 4) minimizing of restraints,**
- 5) assisting with meals,**
- 6) menu planning,**
- 7) continence care product supplies,**
- 8) administrator qualifications,**
- 9) complaints and reporting, and**
- 10) housekeeping supplies.**

**During the course of the inspection, the inspector(s) spoke with the administrator, director of care - clinical (DOC-C), registered practical nurses (RPN), personal support workers (PSW), home physician, registered dietitian (RD), housekeeping manager, housekeeping aides, residents, substitute decision makers and family member.**

**During the course of the inspection, the inspectors conducted observations of staff and resident interactions, provision of care, meal services, record review of resident and home records, staffing schedules and relevant policies and procedures.**

**The following Inspection Protocols were used during this inspection:**



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**Accommodation Services - Housekeeping  
Contenance Care and Bowel Management  
Dignity, Choice and Privacy  
Family Council  
Minimizing of Restraining  
Nutrition and Hydration  
Personal Support Services  
Reporting and Complaints  
Skin and Wound Care  
Sufficient Staffing**

**During the course of this inspection, Non-Compliances were issued.**

**1 WN(s)**

**1 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**



**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
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 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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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 O.Reg 79/10, s. 50. Skin and wound care**



**Specifically failed to comply with the following:**

- s. 50. (2) Every licensee of a long-term care home shall ensure that,**
- (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; O. Reg. 79/10, s. 50 (2).**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, received 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.

On an identified date, the Ministry of Health and Long Term Care received a complaint in regards to resident #010's skin and wound care management.

Review of resident #010's progress notes documented by staff #138 revealed that on an identified date the resident's substitute decision-maker (SDM) brought his/her concern of the resident's altered skin integrity to the staff's attention. Staff #138 then referred the resident to staff #120, who is also a nurse practitioner, for assessment. Further review of resident #010's progress notes revealed that staff #120 assessed the resident's altered skin integrity on the same day and prescribed treatment.

Review of the home's policy titled, "Skin Care Program: Assessment and Care Planning", policy #02-05-04, effective August 2010, indicated that residents who presented with altered skin integrity received a skin assessment by a registered nursing staff, using clinically appropriate assessment instrument that are specifically designed for skin and wound assessment.



Review of resident #010's assessments failed to reveal a skin assessment completed on the above mentioned identified date for the resident's altered skin integrity.

In an interview, staff #138 stated that resident #010's altered skin integrity were observed on the above mentioned identified date, and was referred to staff #120 for assessment. Staff #138 acknowledged he/she did not complete a skin assessment for resident #010's altered skin integrity.

In an interview, staff #120 stated the home's protocol was to complete a skin assessment by using the weekly skin and wound assessment template for any altered skin integrity by a registered staff. Staff #120 further stated that a skin assessment using the clinically appropriate assessment instrument that is specifically designed for skin and wound should have been completed for resident #010's altered skin integrity on the above mentioned identified date. Staff #120 confirmed that the skin assessment was not completed as required. [s. 50. (2) (b) (i)]

2. The licensee has failed to ensure that a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, was 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 related to nutrition and hydration were implemented.

Review of resident #010's progress notes documented by staff #138 revealed that on an identified date, the resident's SDM brought his/her concern of the resident's altered skin integrity to the staff's attention. Staff #138 then referred the resident to staff #120 for assessment. Further review of resident #010's progress notes revealed that staff #120 assessed the resident's altered skin integrity on the same day.

Review of the home's policy titled, "Skin Care Program: Assessment and Care Planning", policy #02-05-04, effective August 2010, indicated that residents who presented with altered skin integrity are assessed by a registered dietitian who is a member of the staff at the home, and changes to be made to resident's plan of care related to nutrition and hydration.

Review of resident #010's assessments failed to reveal a nutrition and hydration assessment related to the resident's altered skin integrity.

In an interview, staff #138 stated that resident #010's altered skin integrity was observed



on the above mentioned identified date and was referred to staff #120 for assessment. Staff #138 acknowledged he/she did not refer the resident to the registered dietitian (RD) for a nutrition and hydration assessment.

In an interview, staff #110 stated the home's protocol was to refer residents who exhibited altered skin integrity to the registered dietitian for a nutrition and hydration assessment. Staff #110 reviewed staff #120's documentation on the above mentioned identified date and stated the resident should have been referred to the RD for a nutrition and hydration assessment. Staff #110 confirmed that he/she did not receive a referral in relation to resident #010's altered skin integrity, therefore, a nutrition and hydration assessment was not completed for the resident. [s. 50. (2) (b) (iii)]

***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 that a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds,***  
***1) receive 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, and***  
***2) 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, to be implemented voluntarily.***

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Issued on this 22nd day of November, 2017

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

**Original report signed by the inspector.**