

# 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

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, 11<sup>th</sup> Floor Hamilton ON L8P 4Y7

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|  | Licensee Copy/Copie du Titulaire Public Copy/Copie Public |  |  |
|--|---|--|--|
| Date(s) of inspection/Date de l'inspection         | Inspection No/ d'inspection                               | Type of Inspection/Genre d'inspection  |  |
| Oct. 22, 25, 26, 27, 2010                          | 2010 159 2855 21Oct165501                                 |  |  |
|  | 2010_169_2855_25Oct110911                                 | Complaint # H-01311  |  |
| Licensee/Titulaire                                 |   |  |  |
|  |   |  |  |
| Villa Forum  |   |  |  |
| 175 Forum Drive                                    |   |  |  |
| Mississauga, ON                                    |   |  |  |
| L4Z 4E5  |   |  |  |
| FAX: 905 501 1443                                  |   |  |  |
| Long-Term Care Home/Foyer de soins de longue durée |   |  |  |
|  | ·   |  |  |
| Villa Forum  |   |  |  |
| 175 Forum Drive                                    |   |  |  |
| Mississauga, ON                                    |   |  |  |
| L4Z 4E5  |   |  |  |
| FAX: 905 501 1443                                  |   |  |  |
| Name of Inspector(s)/Nom de l'inspecteur(s         | s)  |  |  |
| Asha Sehgal, ID # 159                              | -   |  |  |
| Yvonne Walton, ID# 169                             |   | ·  |  |
| Inspection Summary/Sommaire d'inspection           |   |  |  |
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The purpose of this inspection was to conduct a complaint inspection related to the care and services of a resident.

During the course of the inspection, the inspector spoke with the Administrator, Director of Care, Assistant Director of Care, Registered nursing staff and Personal Support Workers.

During the course of the inspection, the inspector observed the resident in their room and conducted a clinical review, reviewed an identified resident's health records, observed breakfast and noon meal, interviewed residents and staff.

The following Inspection Protocols were used during this inspection: Continence Care and Bowel Management, Falls Prevention and Pain Inspection. Nutrition and hydration Dining Observation

Findings of Non-Compliance were found during this inspection. The following action was taken:

[5] WN [5] VPC

### 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 suivant 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 failed to comply with O. Reg. 79/10, s. 131 (2)

131 (2) The licensee shall ensure that drugs are administered to residents in accordance with the directions for use specified by the prescriber.

#### Findings:

The physician ordered a treatment for a resident and they did not receive it consistently...

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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 that ensures drugs are administered to residents in accordance with the directions for use specified by the prescriber.

WN #2: The Licensee has failed to comply with Long-Term Care Homes Act, 2007, S.O. 2007c8. s.6 (1)

6(1)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 plan of care does not identify strategies to use for a resident who is at risk for falling.

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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 related to ensuring there is a written plan of care for the identified resident and all other resident's, that sets out clear directions to staff and others who provide direct care to the resident. This is to be implemented voluntarily.

WN #3: The Licensee has failed to comply with Long-Term Care Homes Act, 2007, S.O. 2007 c 8. s.6 (10)

- (a) (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when, the resident's care needs change or care set out in the plan is no longer necessary
- (b) the resident's care needs change or care set out in the plan is not longer necessary: or

#### Findings:

1. An identified resident was not reassessed and the plan of care reviewed and revised when there was a significant change in health status.

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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



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requested to prepare a written plan of correction for achieving compliance ensuring that (a) the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when, the resident's care needs change or care set out in the plan is no longer necessary (b) the resident's care needs change or care set out in the plan is not longer necessary, to be implemented voluntarily.

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

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

(b) Assesses the matters referred to in paragraphs 13 and 14 of subsection (3).

#### Findings:

1. The registered dietitian's nutritional assessment for an identified resident was incomplete when there was a significant change in health status.

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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 ensuring, that a registered dietitian who is a member of the staff of the home, (a) completes a nutritional assessment for all residents on admission and whenever there is a significant change in a resident's health condition; and (b) Assesses the matters referred to in paragraphs 13 and 14 of subsection (3), to be implemented voluntarily.

WN #5: The Licensee has failed to comply with O.Reg. 79/10, s. 69

Every licensee of a long-term care home shall ensure that residents with the following weight changes are assessed using an interdisciplinary approach, and that actions are taken and outcomes are evaluated:

3. A change of 10 per cent of body weight, or more, over 6 months.

#### Findings:

There was no documentation to support that an assessment of the significant weight change has been completed with action taken and outcomes evaluated by the multidisciplinary team.

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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 ensuring that residents with the following weight changes are assessed using an interdisciplinary approach, and that actions are taken and outcomes are evaluated: A change of 10 per cent of body weight, or more, over 6 months, 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.



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| Title: | Date: | Date of Report: (if different from date(s) of inspection). |
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