



**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

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**Ministère de la Santé et des Soins de
longue durée**

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Date(s) of inspection/Date de l'inspection September 16, 2010	Inspection No/ d'inspection 2010_188_2759_16Sep094000	Type of Inspection/Genre d'inspection Critical Incident Log # O-000661
Licensee/Titulaire Bruyère Continuing Care Inc. 43 Bruyère St Ottawa ON K1N 5C8 Fax: (613) 562-6333		
Long-Term Care Home/Foyer de soins de longue durée Elisabeth-Bruyère Résidence 43 Bruyere St Ottawa ON K1N 5C8 Fax: (613) 562-6367		
Name of Inspector(s)/Nom de l'inspecteur(s) Lyne Duchesne #117		
Inspection Summary/Sommaire d'inspection		



The purpose of this inspection was to conduct a complaint inspection related to the care and services provided to a resident specifically regarding a skin integrity issue, the administration of a treatment, feeding assistance, mechanical lift maintenance and lost clothing.

During the course of the inspection, the inspector spoke with the home's Senior Director, Residential Services and Administrator, LTC ; the home's director of care; the unit registered nurse; to two of the unit's registered practical nurses; to five of the unit's health care aids; to the unit housekeeper, the food service supervisor and a the laboratory technician from Dynacare Laboratories.

During the course of the inspection, the inspector reviewed the resident's health care records, examined the unit's mechanical lifts, looked at the maintenance and lost laundry logs.

The following Inspection Protocols were during this inspection:

- Accommodation Services – Laundry
- Accommodation Services – Maintenance
- Contenance Care and Bowel Management
- Nutrition and Hydration
- Skin and Wound

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

1 WN
1 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 the LTCHA, 2007 S.O. 2007, c.8, s. 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 direction to staff and others who provide direct care to the resident.

(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.



(9) The licensee shall ensure that the following are documented:
1. The provision of the care set out in the plan of care.

Findings:

- 1. On July 23, 2010, the attending physician communicated in the physician notes to the registered staff changes to the time of the administration of the resident's par re nata (prn) constipation treatment: Fleet enema is not to be given early in the morning. Medication Administration Records note that on July 28, 2010, a fleet enema was administered to the resident at 5 am by registered nursing staff.
2. In the plan of care dated February 23 2010, a therapeutic dietary supplement is ordered to be given to the resident three times per day. There is a lack of documentation in the resident's Medication Administration Records regarding the administration and or resident refusal of the therapeutic dietary supplement for the months of June and July 2010. 8/93 entries are documented in July 2010 and 21/90 entries are documented in June 2010 Medication Administration Records are being given or refused.

Inspector ID #: # 117

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 regarding the communication of changes to ordered treatments, the administration of constipation treatments, as well as the documentation of administration / refusal of the medication / supplements to be implemented voluntarily.

117

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.

[Handwritten signature]

Title: Date:

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

October 18, 2010