

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

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Report Date(s) /

Inspection No / Date(s) du apport No de l'inspection

Log # / Registre no Type of Inspection / **Genre d'inspection**

Mar 29, 2017

2017 449619 0006

032599-16, 004110-17, Complaint

005665-17

Licensee/Titulaire de permis

Regency LTC Operating Limited Partnership on behalf of Regency Operator GP Inc. as General Partner

100 Milverton Drive Suite 700 MISSISSAUGA ON L5R 4H1

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

Chartwell Waterford Long Term Care Residence 2140 Baronwood Drive OAKVILLE ON L6M 4V6

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

SAMANTHA DIPIERO (619)

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): March 14, 15, 16, 17, 2017

The following complaint inspections were completed:

#032599-16 - related to Continence Care

#004110-17 - related to Personal Support Services, and the prevention of Abuse

#005665-17 - related to Continence Care

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Assistant Director of Care (ADOC), Food Services Manager (FSM), Physiotherapist (PT), Registered Nurse (RN), Registered Practical Nurse (RPN), Personal Support Worker (PSW), residents, and family members.

The LTCH Inspector also toured the home, observed the provision of care, reviewed clinical record, policies and procedures.

The following Inspection Protocols were used during this inspection: Continence Care and Bowel Management Dignity, Choice and Privacy Prevention of Abuse, Neglect and Retaliation

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)



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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. 51. Continence care and bowel management

Specifically failed to comply with the following:

s. 51. (2) Every licensee of a long-term care home shall ensure that, (c) each resident who is unable to toilet independently some or all of the time receives assistance from staff to manage and maintain continence; O. Reg. 79/10, s. 51 (2).

Findings/Faits saillants:



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The licensee of a long-term care home failed to ensure that each resident who was unable to toilet independently some or all of the time received assistance from staff to manage and maintain continence.

Resident #002 had a history of bowel and urinary incontinence. A review of the resident's written plan of care, last updated in July 2015, indicated that the resident required extensive assistance from two staff via a lift for transfers. Interview with resident #002 indicated that on an identified date in November 2016, the resident requested assistance for transfer to the bathroom. PSW #110 who was assisting another resident, stated that they immediately advised PSW #108 that resident #002 requested to be toileted and was acknowledged by PSW #108 who was arriving to take resident #002 for their scheduled shower. Resident #002 indicated that they requested to be toileted in their room and instead was taken directly to the shower. Resident #002 further indicated that they requested to be toileted again after entering the shower room but was not accommodated, and stated that they had an episode of incontinence while being showered. The home's policy titled, "Continence Care - Clinical Procedures and Care Services", policy #LTC-CA-WQ-200-02-05, last revised July 2016, stated, "supplies, equipment, and incontinence products will be provided to the resident to support their attainment of continence". Interview with the Director of Care confirmed that PSW #108 failed to provide assistance with transferring to the commode to resident #002 who was unable to toilet independently to manage and maintain continence.

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 with r. 51(2) where every licensee of a long-term care home shall ensure that, (c) each resident who is unable to toilet independently some or all of the time receives assistance from staff to manage and maintain continence, to be implemented voluntarily.



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Issued on this 30th day of March, 2017

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

Original report signed by the inspector.