



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

Inspection Report under the Long-Term Care Homes Act, 2007

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
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Table with 3 columns: Date(s) of Inspection, Inspection No, Type of Inspection. Row 1: Nov 21, Dec 11, 12, 2012; 2012_094144_0042; Other

Licensee/Titulaire de permis

QCC CORP
3942 West Graham Place, LONDON, ON, N6P-1G3

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

WATFORD QUALITY CARE CENTRE
344 VICTORIA STREET, P. O. BOX 400, WATFORD, ON, N0M-2S0

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

CAROLEE MILLINER (144)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct an Other inspection.

During the course of the inspection, the inspector(s) spoke with the Resident Council Representative, Director of Care, Food Service Supervisor, one RPN and three PSW's.

During the course of the inspection, the inspector(s) completed a tour of the home and observed dietary and nursing services during the lunch meal.

The following Inspection Protocols were used during this inspection:

Accommodation Services - Maintenance

Admission Process

Dining Observation

Infection Prevention and Control

Residents' Council

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	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 LTCHA, 2007 S.O. 2007, c.8, s. 15. Accommodation services
Specifically failed to comply with the following subsections:**

s. 15. (2) Every licensee of a long-term care home shall ensure that,
(a) the home, furnishings and equipment are kept clean and sanitary;
(b) each resident's linen and personal clothing is collected, sorted, cleaned and delivered; and
(c) the home, furnishings and equipment are maintained in a safe condition and in a good state of repair. 2007, c. 8, s. 15 (2).

Findings/Faits saillants :

1. During observation of the lunch meal, the wooden backs and arms of multiple dining room chairs were noted to be heavily chipped. [LTCHA,2007,S.O.c.8,s.15(2)(a)]

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 the home, furnishings and equipment are kept clean and sanitary., to be implemented voluntarily.

**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 90. Maintenance services
Specifically failed to comply with the following subsections:**

s. 90. (1) As part of the organized program of maintenance services under clause 15 (1) (c) of the Act, every licensee of a long-term care home shall ensure that,
(a) maintenance services in the home are available seven days per week to ensure that the building, including both interior and exterior areas, and its operational systems are maintained in good repair; and
(b) there are schedules and procedures in place for routine, preventive and remedial maintenance. O. Reg. 79/10, s. 90 (1).

Findings/Faits saillants :



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1. During a tour of the home, the following observations were identified:

- A) Dining room counter drawers are not secure and fall when pulled open
- B) Dining room cupboard door surfaces are damaged, chipped and in need of repair
- C) Room #2, the top of the radiator under the window is not attached to the radiator base
- D) Room 11, rust observed around taps and caulking split around the toilet base
- E) The faucet in the long corridor washroom was noted to be running and difficult to turn off. [O.Reg.79/10,s.90(1)(b)]

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 that there are schedules and procedures in place for routine, preventative and remedial maintenance, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 229. Infection prevention and control program Specifically failed to comply with the following subsections:

s. 229. (4) The licensee shall ensure that all staff participate in the implementation of the program. O. Reg. 79/10, s. 229 (4).

Findings/Faits saillants :

1. The following observations were noted during a tour of the home:

- A) Multiple unlabeled resident personal hygiene items such as hair combs, brushes, toothbrushes, bed pans and wash basins
- B) [REDACTED] more than one resident's personal hygiene items stored together in the same container. [O.Reg.79/10,s.229 (4)]

WN #4: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 79. Posting of information



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Specifically failed to comply with the following subsections:

- s. 79. (3) The required information for the purposes of subsections (1) and (2) is,
- (a) the Residents' Bill of Rights;
 - (b) the long-term care home's mission statement;
 - (c) the long-term care home's policy to promote zero tolerance of abuse and neglect of residents;
 - (d) an explanation of the duty under section 24 to make mandatory reports;
 - (e) the long-term care home's procedure for initiating complaints to the licensee;
 - (f) the written procedure, provided by the Director, for making complaints to the Director, together with the name and telephone number of the Director, or the name and telephone number of a person designated by the Director to receive complaints;
 - (g) notification of the long-term care home's policy to minimize the restraining of residents, and how a copy of the policy can be obtained;
 - (h) the name and telephone number of the licensee;
 - (i) an explanation of the measures to be taken in case of fire;
 - (j) an explanation of evacuation procedures;
 - (k) copies of the inspection reports from the past two years for the long-term care home;
 - (l) orders made by an inspector or the Director with respect to the long-term care home that are in effect or that have been made in the last two years;
 - (m) decisions of the Appeal Board or Divisional Court that were made under this Act with respect to the long-term care home within the past two years;
 - (n) the most recent minutes of the Residents' Council meetings, with the consent of the Residents' Council;
 - (o) the most recent minutes of the Family Council meetings, if any, with the consent of the Family Council;
 - (p) an explanation of the protections afforded under section 26; and
 - (q) any other information provided for in the regulations. 2007, c. 8, ss. 79 (3)

Findings/Faits saillants :

1. The home policy to minimize the restraining of residents is not posted. This was confirmed by the Director of Care.
[LTCHA,2007,S.O.c.8,s.79(3)(g)]

WN #5: The Licensee has failed to comply with O.Reg 79/10, s. 73. Dining and snack service



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Specifically failed to comply with the following subsections:

s. 73. (1) Every licensee of a long-term care home shall ensure that the home has a dining and snack service that includes, at a minimum, the following elements:

1. Communication of the seven-day and daily menus to residents.
2. Review, subject to compliance with subsection 71 (6), of meal and snack times by the Residents' Council.
3. Meal service in a congregate dining setting unless a resident's assessed needs indicate otherwise.
4. Monitoring of all residents during meals.
5. A process to ensure that food service workers and other staff assisting residents are aware of the residents' diets, special needs and preferences.
6. Food and fluids being served at a temperature that is both safe and palatable to the residents.
7. Sufficient time for every resident to eat at his or her own pace.
8. Course by course service of meals for each resident, unless otherwise indicated by the resident or by the resident's assessed needs.
9. Providing residents with any eating aids, assistive devices, personal assistance and encouragement required to safely eat and drink as comfortably and independently as possible.
10. Proper techniques to assist residents with eating, including safe positioning of residents who require assistance.
11. Appropriate furnishings and equipment in resident dining areas, including comfortable dining room chairs and dining room tables at an appropriate height to meet the needs of all residents and appropriate seating for staff who are assisting residents to eat. O. Reg. 79/10, s. 73 (1).

Findings/Faits saillants :

1. A) During a tour of the home, one PSW was observed standing while feeding morning nourishment to a resident in the common area
- B) During the lunch meal, one RPN was observed standing while feeding a resident. [O.Reg,79/10,s.73(1)(9)]
- C) One PSW was observed providing morning nourishment to residents in the common area without reference to the resident's diets, special needs and preferences. The PSW stated she knows what the residents need. [O.Reg,70/10,s.73(1)(5)]

Issued on this 12th day of December, 2012

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