



**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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Date(s) of inspection/Date de l'inspection May 13, 16, 2011	Inspection No/ d'inspection 2011_193_9612_13May095806	Type of Inspection/Genre d'inspection Complaint T- 2986
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Licensee/Titulaire Toronto Long-Term Care Homes and Services, 55 John Street, Metro Hall, 11th Floor, Toronto, ON, M5V 3C6
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Long-Term Care Home/Foyer de soins de longue durée Wesburn Manor, 400 The West Mall, Etobicoke, On, M9C 5S1

Name of Inspector/Nom de l'inspecteur Monica Klein # 193
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Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection related to falls.

During the course of the inspection, the inspector spoke with: direct care staff, registered staff, Falls prevention and management Program Coordinator, Director of Care and Programs and Services Manager.

During the course of the inspection, the inspector: reviewed health records and home's Falls prevention and management program.

The following Inspection Protocols were used during this inspection:
Falls prevention and management
Personal support services

Findings of Non-Compliance were found during this inspection. The following action was taken:
3 WN
2 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:

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-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.)

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 LTCHA, 2007, S. O. 2007 c. 8, s. 6 (10) (b) and (11) (b).
 (10)(b) 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;
 (11)(b) When a resident is reassessed and the plan of care reviewed and revised, if the plan of care is being revised because care set out in the plan has not been effective, the licensee shall ensure that different approaches are considered in the revision of the plan of care.

Findings:

- The plan of care for an identified resident was not reviewed and revised after the resident had numerous falls.
- In one instance the plan of care was reviewed but no different approaches related to prevention of falls were indicated.

Inspector ID #: 193

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 will ensure all residents are reassessed and their plan of care is reviewed after a fall and any other time when the residents care needs change or when the care set out in the plan of care has not been effective, considering different approaches in the revision of plan of care, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O. Reg. 79/10 s. 49 (2).
 Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that where the condition or circumstances of the resident require, a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls.

Findings:

- The home's Falls Prevention and Management policy RC-0518-21 states that "a falls assessment, the Morse Scale, is conducted by the interdisciplinary team for all residents who have fallen or who continue to fall."
- An identified resident had numerous falls and the resident was not assessed using the Scale Morse as required.


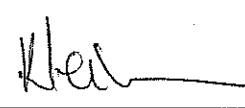
Inspector ID #:	193
Additional Required Actions:	
VPC - pursuant to the <i>Long-Term Care Homes Act, 2007</i> , S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance by ensuring that when a resident has fallen, the resident is assessed and that where the condition or circumstances of the resident require, a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls, to be implemented voluntarily.	

WN #3: The Licensee has failed to comply with O. Reg. 70/10 s. 8(1).
 (1)Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,
 (b) is complied with.

Findings:
 According to O. Reg. 79/10. s. 49 (2) every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that where the condition or circumstances of the resident require, a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls.

- The home's Falls and prevention management program RC-0518-21 states that "all residents who have fallen require an interdisciplinary team assessment to clearly understand the contributing factors and appropriate interventions to prevent future falls. A falls assessment, the Morse Scale, is conducted by the interdisciplinary team for all residents who have fallen or who continue to fall."
- An identified resident had numerous falls and the resident was not assessed using the Scale Morse as required.
- Post fall management from the same policy stated: "3. Notify the attending Physician and ensure immediate treatment after the fall and obtain order to referral to PT and OT".
- Physiotherapy and Occupational Therapy referrals were not made after an identified resident felt on numerous occasions.

Inspector ID #:	193
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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.	
			
Title:	Date:	Date of Report: (if different from date(s) of inspection).	
		June 6, 2011	