



**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 March 16, 2011 and March 21, 2011 | Inspection No/ d'inspection 2011_189_2663_16Mar102107 | Type of Inspection/Genre d'inspection Critical Incident T-047 |
|--|---|---|

Licensee/Titulaire
Revera Long Term Care Inc.
55 Standish Court 8th Floor
Mississauga, Ontario
L5R 4B2

Long-Term Care Home/Foyer de soins de longue durée
Westside
1145 Albion Road
Etobicoke, Ontario
M9V 4J7

Name of Inspector(s)/Nom de l'inspecteur(s)
Nicole Ranger (189)

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a Critical Incident inspection regarding personal care.

During the course of the inspection, the inspector spoke with: Executive Director, Assistant Director of Care, Director of Care, Registered Staff, Personal Support Workers

During the course of the inspection, the inspector:

- Conducted a walk through of resident home area and common areas
- Reviewed health care records

The following Inspection Protocol were used in part or in whole during this inspection:

Personal Support Services Inspection Protocol

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

4 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/Ordre de conformité
WAO - Work and Activity Order/Ordre: 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. 26 (3) 12

(3) A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident:

12. Dental and oral status, including oral hygiene.

Findings:

1. There is no assessment of dental or oral status for a resident

Inspector ID #: 189

WN # 2: The Licensee has failed to comply with LTCHA 2007, S.O. 2007, c.8, s. 6 (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,
(b) the resident's care needs change or care set out in the plan is no longer necessary

Findings:

1. A resident was not assessed and plan of care not revised when the resident care needs changed

Inspector ID #: 189

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 to ensure residents are reassessed and written plans of care is revised immediately as required, to be implemented voluntarily.

WN # 3: The Licensee has failed to comply with O. Reg. 79/10. s. 51 (2) b, g

~~**(2) Every licensee of a long-term care home shall ensure that,**~~

~~**(b) each resident who is incontinent has an individualized plan, as part of his or her plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented;**~~

(g) residents who require continence care products have sufficient changes to remain clean, dry and comfortable

Findings:

- 1 2 residents did not receive assistance to remain clean, dry and comfortable.
2. There is no individualized plan of care for continence management for a resident

Inspector ID #: 189

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 to ensure residents who require continence care have sufficient changes to remain clean, dry and comfortable, to be implemented voluntarily.

WN # 4: The Licensee has failed to comply with O.Reg. 79/10, s. 25 (1) b
25. (1) Every licensee of a long-term care home shall ensure that,
(b) The initial plan of care is developed within 21 days of the admission.

Findings:

1. There was no initial plan of care for personal care needs developed within 21 days for a resident

Inspector ID #: 189

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).

Nicole Ranger
April 8th, 2011