



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: Jan 6, 9, 24, 25, Mar 1, 2, 2012; 2012\_080189\_0001; Complaint

Licensee/Titulaire de permis

REVERA LONG TERM CARE INC.
55 STANDISH COURT, 8TH FLOOR, MISSISSAUGA, ON, L5R-4B2

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

WESTSIDE
1145 Albion Road, Rexdale, ON, M9V-4J7

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

NICOLE RANGER (189)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Complaint inspection.

During the course of the inspection, the inspector(s) spoke with Executive Director, Director of Care, Education Coordinator, Registered Staff, Personal Support Workers

During the course of the inspection, the inspector(s) Conducted walk through of resident and common areas
Reviewed health care records

The following Inspection Protocols were used during this inspection:

Continence Care and Bowel Management

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Table with 2 columns: Legend and Legendé. Legend: WN - Written Notification, VPC - Voluntary Plan of Correction, DR - Director Referral, CO - Compliance Order, WAO - Work and Activity Order. Legendé: 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 subsections:**

- s. 51. (2) Every licensee of a long-term care home shall ensure that,
- (a) each resident who is incontinent receives an assessment that includes identification of causal factors, patterns, type of incontinence and potential to restore function with specific interventions, and that where the condition or circumstances of the resident require, an assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for assessment of incontinence;
  - (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;
  - (c) each resident who is unable to toilet independently some or all of the time receives assistance from staff to manage and maintain continence;
  - (d) each resident who is incontinent and has been assessed as being potentially continent or continent some of the time receives the assistance and support from staff to become continent or continent some of the time;
  - (e) continence care products are not used as an alternative to providing assistance to a person to toilet;
  - (f) there are a range of continence care products available and accessible to residents and staff at all times, and in sufficient quantities for all required changes;
  - (g) residents who require continence care products have sufficient changes to remain clean, dry and comfortable; and
  - (h) residents are provided with a range of continence care products that,
    - (i) are based on their individual assessed needs,
    - (ii) properly fit the residents,
    - (iii) promote resident comfort, ease of use, dignity and good skin integrity,
    - (iv) promote continued independence wherever possible, and
    - (v) are appropriate for the time of day, and for the individual resident's type of incontinence. O. Reg. 79/10, s. 51 (2).

**Findings/Faits saillants :**

1. Multiple Personal Support Workers (PSW) on second, third and fourth floor confirmed during interviews with inspector on January 9th, 2012 that between October and November 2011, they were instructed to use only one incontinent product per shift and did not have access to additional incontinence products when requested.

PSW's informed inspector that since this issue was brought to media attention, they are now able to get incontinent products when requested for residents.

[s.51(2)f]

*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 there are a range of continence care products available and accessible to residents and staff at all times, and in sufficient quantities for all required changes, to be implemented voluntarily.*

Issued on this 13th day of March, 2012

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

