

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

Rapport d'inspection prévue
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

Sudbury Service Area Office
159 Cedar Street Suite 403
SUDBURY ON P3E 6A5
Telephone: (705) 564-3130
Facsimile: (705) 564-3133

Bureau régional de services de
Sudbury
159, rue Cedar Bureau 403
SUDBURY ON P3E 6A5
Téléphone: (705) 564-3130
Télécopieur: (705) 564-3133

Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Sep 9, 2019	2019_671684_0031	004276-19	Follow up

Licensee/Titulaire de permis

Wikwemikong Nursing Home Limited
2281 Wikwemikong Way P.O. Box 114 Wikwemikong ON P0P 2J0

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

Wikwemikong Nursing Home
2281 Wikwemikong Way P.O. Box 114 Wikwemikong ON P0P 2J0

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

SHELLEY MURPHY (684)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): September 3-4, 2019.

The following intake was inspected during this Follow Up Inspection:

-One log related to compliance order (CO) #001 that was issued during inspection #2019_679638_0004, s.75 (3) of the Ontario Regulation 79/10, specific to ensuring that a nutrition manager is on site at the home.

During the course of the inspection, the inspector(s) spoke with the Administrator and the Food Service Supervisor.

The following Inspection Protocols were used during this inspection:
Sufficient Staffing

During the course of this inspection, Non-Compliances were issued.

- 1 WN(s)
- 0 VPC(s)
- 0 CO(s)
- 0 DR(s)
- 0 WAO(s)

The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 75. (3)	CO #001	2019_679638_0004		684

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Légende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 73.
Staff qualifications**

Every licensee of a long-term care home shall ensure that all the staff of the home, including the persons mentioned in sections 70 to 72,

- (a) have the proper skills and qualifications to perform their duties; and
(b) possess the qualifications provided for in the regulations. 2007, c. 8, s. 73..**

Findings/Faits saillants :

1. The licensee has failed to ensure that all staff of the home had the proper skills and qualifications to perform their duties; and possessed the qualifications provided for in the regulations.

During a review of compliance order #001, Inspector #684 noted that the order specifically stated a) ensure that the home maintains a nutrition manager who is an active member of the Canadian Society of Nutrition Management (CSNM) or a Registered Dietitian.

Inspector #684 reviewed the Dietary Manager's resume, as well as email correspondence sent to Inspector #684 from the Dietary Manager. Inspector #684 noted in the email correspondence that the Dietary Manager was approved to write the entrance exam for the CSNM exam on a specified day in 2019. A document titled "Canadian Society of Nutrition Management Exam Candidate Rules", indicated, "Notice of exam results will be received in writing 6 to 8 weeks after the exam date".

Inspector #684 asked the Dietary Manager about being an active member of the Canadian Society of Nutrition Management. The Dietary Manager stated, "I was many years ago but because I was away I had to rewrite the exam".

During an interview held with the Inspector, the Administrator indicated that it was their expectation that the Dietary Manager was an active member of the CSNM. Administrator told Inspector #684 that this was their fault as they took their word as opposed to seeing documented proof. [s. 73.]

Issued on this 10th day of September, 2019

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

Original report signed by the inspector.