

Ministry of Health and Long-Term Care

Inspection Report under the Long-Term Care Homes Act, 2007 Ministère de la Santé et des Soins de longue durée

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
Direction de l'amélioration de la performance et de la
conformité

Data(a) of inapportion/Data(a) do

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### Public Copy/Copie du public

l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection	
Nov 24, 25, 29, 30, Dec 1, 2011	2011_083178_0023	Complaint	
Licensee/Titulaire de permis			
RYKKA CARE CENTRES LP 50 SAMOR ROAD, SUITE 205, TORONTO, ON, M6A-1J6 Long-Term Care Home/Foyer de soins de longue durée			
HAWTHORNE PLACE CARE CENTRE 2045 FINCH AVENUE WEST, NORTH YORK, ON, M3N-1M9			
Name of Inspector(s)/Nom de l'inspec	teur ou des inspecteurs		
SUSAN LUI (178)			
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 Administrator, Director of Care (DOC), Assistant Director of Care (ADOC), Staff Educator, Registered staff, Personal Support Workers (PSWs), and a resident.

During the course of the inspection, the inspector(s) reviewed resident records, reviewed home policies and programs, observed resident care.

The following Inspection Protocols were used during this inspection:

**Falls Prevention** 

Minimizing of Restraining

Responsive Behaviours

Findings of Non-Compliance were found during this inspection.

### NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	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. 110. Requirements relating to restraining by a physical device

Specifically failed to comply with the following subsections:

- s. 110. (1) Every licensee of a long-term care home shall ensure that the following requirements are met with respect to the restraining of a resident by a physical device under section 31 or section 36 of the Act:
- 1. Staff apply the physical device in accordance with any manufacturer's instructions.
- 2. The physical device is well maintained.
- 3. The physical device is not altered except for routine adjustments in accordance with any manufacturer's instructions. O. Reg. 79/10, s. 110 (1).

## Findings/Faits saillants:

1. The restraining device for an identified resident was not applied in accordance with manufacturer's instructions on an identified date.

Home staff corrected the application of the device after the error was identified by the inspector.

Nursing and physio staff were unable to provide the inspector with manufacturer's instructions for the application of the restraining device.

Home staff obtained manufacturer's instructions for the restraining device the following day.

2. Manufacturer's instructions directing staff how to apply lap belt restraints are not available in the home. The home's Restraint Policy (E-25) states that "the nursing staff will apply the physical device according to the manufacturer's specifications and as comfortably as possible". However, no manufacturer's instructions for application of lap belts were available in the home during the inspection.

## 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 that an identified resident's restraint is applied according to manufacturer's instructions, and that the manufacturer's instructions for application of lap belts are made available and accessible to the staff applying these devices to residents, to be implemented voluntarily.



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Issued on this 1st day of December, 2011

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

Ausen (178)