



**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 sous la
Loi de 2007 sur les foyers de
soins de longue durée**

**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**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Nov 15, 2013	2013_162109_0039	T-576-13	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'inspecteur ou des inspecteurs

SUSAN SQUIRES (109), JUDITH HART (513)

Inspection Summary/Résumé de l'inspection

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

**This inspection was conducted on the following date(s): October 28, 29, 30, 31,
2013**

**During the course of the inspection, the inspector(s) spoke with Assistant
Director of Care, Resident, Family, Registered Staff, Wound Care Nurse, Dietitian**

**During the course of the inspection, the inspector(s) Conducted a walk through
of the unit, reviewed the health Record for the identified resident, reviewed the
Skin Care Program, observed the Medication Administration Record, reviewed
the pixalere skin assessment program**

The following Inspection Protocols were used during this inspection:



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Medication

Skin and Wound Care

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

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. 8. Policies, etc., to be followed, and records



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Specifically failed to comply with the following:

s. 8. (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,
(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).
(b) is complied with. O. Reg. 79/10, s. 8 (1).

Findings/Faits saillants :

1. The licensee failed to ensure that any plan, policy, protocol, procedure, strategy or system instituted or otherwise put in place is (b) complied with.

The licensee has a skin care program in place for the home. The program includes algorithms which apply to the various types of altered skin conditions.

According to the algorithm for Diabetes Ulcers, a referral is to be made to the dietitian for nutritional recommendations.

Record review and staff interview with the dietitian confirmed that a referral had not been made to the dietitian. The resident's altered skin integrity progressed until the resident was hospitalized and subsequently underwent an amputation of the affected area.

The staff did not follow the home's policy for the wound care program. [s. 8. (1)]

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 any plan, policy, protocol, procedure, strategy or system instituted or otherwise put in place is complied with, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 50. Skin and wound care



Specifically failed to comply with the following:

- s. 50. (2) Every licensee of a long-term care home shall ensure that,**
(b) a resident exhibiting altered skin integrity, including skin breakdown,
pressure ulcers, skin tears or wounds,
(i) receives a skin assessment by a member of the registered nursing staff,
using a clinically appropriate assessment instrument that is specifically
designed for skin and wound assessment,
(ii) receives immediate treatment and interventions to reduce or relieve pain,
promote healing, and prevent infection, as required,
(iii) is assessed by a registered dietitian who is a member of the staff of the
home, and any changes made to the resident's plan of care relating to nutrition
and hydration are implemented, and
(iv) is reassessed at least weekly by a member of the registered nursing staff,
if clinically indicated; O. Reg. 79/10, s. 50 (2).
-

Findings/Faits saillants :

1. The licensee failed to ensure that the resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds has been assessed by a registered dietitian who is a member of the staff of the home.

Resident #1 developed skin alteration on an identified date. The wound progressed until months later, when the nurse assessed the resident and found the resident to be sweating, lethargic, and the affected area was swollen, bluish in colour, warm to touch and extremely foul smelling. The resident was admitted to the hospital and subsequently underwent surgery of the affected wound area which included amputation.

According to the Home's Wound Care Program and staff interviews, the algorithm for Diabetic Ulcer was implemented for this resident. The algorithm includes a referral to the dietitian for recommendations. Record review revealed that there were no referrals documented on the electronic documentation system. The registered dietitian (RD) of the home was interviewed and the RD confirmed that there were no assessments of the resident's dietary requirements after the alteration in skin integrity had been identified on an identified date through to months later when the resident was admitted to hospital. The RD did not become aware of the altered skin integrity of the resident until readmission to the home. [s. 50. (2) (b) (iii)]



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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 the resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds has been assessed by a registered dietitian who is a member of the staff of the home, to be implemented voluntarily.

Issued on this 8th day of January, 2014

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

A handwritten signature in black ink, appearing to be "S. J. ...", written over a white background within a rectangular box.