



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

**Rapport d'inspection  
prévues 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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Direction de l'amélioration de la performance et de la  
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<b>Date(s) of inspection/Date de l'inspection</b> January 18, 19, 21, 2011	<b>Inspection No/ d'inspection</b> 2011_159_2953_17Jan173525	<b>Type of Inspection/Genre d'inspection</b> H-00012 Complaint
<b>Licensee/Titulaire</b> 1245556 ONT.Inc. 200 RONSON DRIVE SUITE 305, TORONTO, ONT. M9W-5Z9		
<b>Long-Term Care Home/Foyer de soins de longue durée</b> BURTON MANOR 5 STERRITT DRIVE, BRAMPTON , ONTARIO L6Y 5P3		
<b>Name of Inspector/Nom de l'inspecteur</b> Asha Sehgal		

**Inspection Summary/Sommaire d'inspection**

The purpose of this inspection was to conduct multiple complaint inspections.

During the course of the inspection, the inspector spoke with: Administrator, Director of Care, and Assistant Director of Care, Registered Dietitian, Nursing staff, Personal Support Service Workers (PSWs), Dietary staff and residents.

During the course of the inspection, the inspector visited residents in their rooms, observed noon meal service, reviewed resident health records, observed care and service.

The following Inspection Protocols were used during this inspection:  
Nutrition and Hydration  
Continence Care and Bowel Management  
Personal Support Services.

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

- 1 WN
- 1 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/Ordres de conformité  
**WAO** – Work and Activity Order/Ordres: 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 The Licensee has failed to comply with O.Reg. 79/10, s. 69. (1) (3):

Every licensee of a long-term care home shall ensure that residents with the following weight changes are assessed using an interdisciplinary approach, and that actions are taken and outcomes are evaluated:

- (1) A change in 5 % of body weight , or more, over one month
- (3) A change of 10 % of body weight, or more, over six months.

**Findings:**


1. The multidisciplinary progress notes for an identified resident completed by Registered Dietitian on January 12, 2011 indicated that an identified resident had 18 % weight loss over one month. Resident's monthly weights recorded also identified 18.0% weight change over one month. There was no information found that the resident was reweighed and the actual weight changes verified. Identified resident's weight changes were not assessed and measures were not taken to address unplanned weight changes. January 2011, the Administrator reported that the resident was reweighed, the correct weight was obtained and there was a weight loss of 5 kg (7.5%) over a month.
2. The multidisciplinary progress notes in August 2010 documented by the Registered Dietitian stated that an identified resident (#2) had experienced 12.5 % weight loss over six months and also September 2010, notes stated 13.4 % weight loss over six months. A review of resident's accessible health records confirmed that the resident was not assessed by the Registered Dietitian using an interdisciplinary approach and care planning interventions were not revised or implemented to address the weight loss The nutritional assessment documented by the Registered Dietitian in September 2010, did not include a calculation of calorie, protein and fluid needs based on the clinical condition of the resident.

**Inspector ID #:** 159

**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 ensuring that residents with the following weight changes are assessed using an interdisciplinary approach, and that actions are taken and outcomes are evaluated: A change in 5 % of body weight , or more, over one month, a change of 10 % of body weight , or more, over six months, to be implemented voluntarily



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.   Revised for the purpose of publication - Sept 29, 2011
Title: _____ Date: _____	Date of Report: (if different from date(s) of inspection).