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

Rapport d'inspection prévue 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

Ministère de la Santé et des Soins de longue durée
Division de la responsabilisation et de la performance du système de santé
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Date(s) of inspection/Date de l'inspection	**Inspection No/ d'inspection**	**Type of Inspection/Genre d'inspection**
January 18, 19, 20, 2011	2011_159_2953_17Jan173354	H-03058 Complaint

Licensee/Titulaire
1245556 ONT.Inc.
200 RONSON DRIVE SUITE 305, TORONTO, ONT. M9W-5Z9

Long-Term Care Home/Foyer de soins de longue durée
BURTON MANOR
5 STERRITT DRIVE, BRAMPTON , ONTARIO L6Y 5P3

Name of Inspecto/Nom de l'inspecteur

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, Registered Nursing staff, Personal Support Service workers (PWSs), Dietary staff and several residents.

During the course of the inspection, the inspector: Reviewed residents health records, visited residents in rooms, observed care and service, interviewed staff, observed noon meal service and afternoon snacks.

The following Inspection Protocols were used during this inspection:
Nutrition and Hydration
Personal Support Services
Skin and wound

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

3 WN
3 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 LTCHA, 2007, s. O. 2007 c. 8, s. 6 (1)
Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out, clear directions to staff and others who provide direct care to the resident.

Findings:

1. An identified resident's accessible plan of care did not include nutritional interventions related to weight loss, abnormal lab values, exhibiting impaired skin integrity, and dehydration.
2. The electronic multidisciplinary progress notes in August 2010 had identified 12.5% weight loss over six months. The Registered Dietitian had documented in the progress notes September 2010, stated that the resident had 13.4 % weight loss over six months. The plan of care was not reviewed to include interventions to address weight changes.
3. Resident Assessment Protocol triggered for dehydration in July 2010 stated that the resident takes diuretic, this may increase risk for dehydration and potassium losses. The plan of care was not revised to include interventions regarding risk of dehydration and interventions for fluid maintenance and measures to reduce risk of dehydration.
4. The plan of care of identified resident was not updated to identify impaired skin integrity. The Multidisciplinary progress notes in August 2010 stated the resident's identified impaired skin area remain red and excoriated.

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 with ensuring that there is a written plan of care for each resident that set out, clear directions to staff and others who provide direct care to the resident to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg. 79/10, s. 26(4) (a) (b)
The licensee ensure that a registered dietitian who is a member of the staff of the home.
(a) completes a nutritional assessment for all residents on admission and whenever there is a significant change in a health condition: and
(b) assesses the matters referred to in paragraphs 13 and 14 of subsection (3)

Findings:
There was no supportive documentation to indicate that the identified resident's hydration and nutritional needs were fully assessed. The Registered Dietitian did not complete a nutrition assessment for identified resident in relation to resident's change in oral intake and hydration deficit. The nutritional assessment documented in the progress notes August 2010 by Registered Dietitian did not include hydration issues, adequacy of fluid intake and fluid needs based on the significant change in resident's status.

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 a Registered Dietitian who is a member of the staff of the home completes a nutritional assessment for all residents on admission and whenever there is a significant change in a health condition to be implemented voluntarily.

WN #3: The Licensee has failed to comply with O. Reg. 79/10, 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 tear or wounds,
(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.

Findings:
There was no documentation to indicate that the Registered Dietitian had assessed identified resident for actual altered skin integrity as identified in the progress notes. The Multidisciplinary progress notes dated August 2010 stated that the resident's identified altered skin integrity area remains red and excoriated.

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 a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tear or wounds, 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 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. Nkle Selgut
Title: Date:	Date of Report: (if different from date(s) of inspection). July 21, 2011