

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

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## Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	_	Type of Inspection / Genre d'inspection
May 22, 2013	2013_102116_0017	T-107-13	Critical Incident System

## Licensee/Titulaire de permis

SOUTHLAKE RESIDENTIAL CARE VILLAGE 640 GRACE STREET, NEWMARKET, ON, L3Y-2L1

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

SOUTHLAKE RESIDENTIAL CARE VILLAGE

640 GRACE STREET, NEWMARKET, ON, L3Y-2L1

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

SARAN DANIEL-DODD (116)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): May 8, 9, 10, 13, 2013

T-107-13

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, MDS-RAI Coordinator, Registered staff members and Personal Support Workers.

During the course of the inspection, the inspector(s) reviewed the health record of identified residents, observed identified residents within home areas and the following home policies: post fall assessment (RESI-10-02),responsive behaviours (09-05-01).

The following Inspection Protocols were used during this inspection: Falls Prevention

**Responsive Behaviours** 

Findings of Non-Compliance were found during this inspection.

Legend	Legendé		
WN - Written Notification	WN – Avis écrit		
VPC - Voluntary Plan of Correction	VPC – Plan de redressement volontaire		
DR - Director Referral	DR – Aiguillage au directeur		
CO – Compliance Order	CO – Ordre de conformité		
WAO - Work and Activity Order	WAO – Ordres : travaux et activités		



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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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 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.

Ce qui suit constitue un avis écrit de nonrespect 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. 49. Falls prevention and management

Specifically failed to comply with the following:

s. 49. (2) Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that where the condition or circumstances of the resident require, a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls. O. Reg. 79/10, s. 49 (2).

## Findings/Faits saillants:

- 1. The licensee failed to ensure that a post fall assessment using a clinically appropriate assessment tool specifically designed for falls was completed when Resident #1 experienced a fall.
- Resident #1 identified at moderate risk for falls sustained an injury requiring surgery after experiencing a fall. A post fall assessment was not conducted using a clinically appropriate instrument that is specifically designed for falls.
- Interviews held with Registered staff members and members of management confirmed a post fall assessment should be completed after every fall as per the homes policy and procedures [s. 49. (2)].



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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 when a resident has fallen, the resident is assessed and that where the condition or circumstances of the resident require, a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls, to be implemented voluntarily.

Issued on this 5th day of June, 2013

Seron Daviel-Dock

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

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