

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

Long-Term Care Homes Division **Long-Term Care Inspections Branch**

Division des foyers de soins de longue durée Inspection de soins de longue durée

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Report Date(s) /

Inspection No / Date(s) du apport No de l'inspection Log # / Registre no Type of Inspection / **Genre d'inspection**

Feb 27, 2017

2017_654605_0004 016929-15

Complaint

Licensee/Titulaire de permis

VILLA COLOMBO SENIORS CENTRE (VAUGHAN) INC. 10443 HIGHWAY 27, KLEINBURG VAUGHAN ON LOJ 1CO

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

VILLA COLOMBO SENIORS CENTRE 10443 HIGHWAY 27, KLEINBURG VAUGHAN ON LOJ 1C0

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

SARAH KENNEDY (605), KAREN MILLIGAN (650)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): November 21, 22, 23, 24, 25, 28 and 29, 2016 and February 24, 2017.

This intake was inspected concurrently with the Resident Quality Inspection #2016 397607 0025.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), registered nursing staff, Social Worker (SW) Personal Support Workers, residents and family members.

The following Inspection Protocols were used during this inspection: Continence Care and Bowel Management Personal Support Services Skin and Wound Care

During the course of this inspection, Non-Compliances were issued.

- 1 WN(s)
- 1 VPC(s)
- 0 CO(s)
- 0 DR(s)
- 0 WAO(s)



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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. 50. Skin and wound care



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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:



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1. The licensee has failed to ensure that a resident who has exhibited altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, 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.

A complaint from an identified complainant was received via the Ministry of Health and Long-term Care (MOHLTC) INFOLINE. The complainant was concerned about resident #015's skin care.

A review of resident #015's progress notes revealed the resident experienced altered skin integrity on an identified date. Further review of the resident's clinical records revealed resident #015 did not receive a skin assessment by a member of the registered nursing staff when the resident's skin integrity became altered.

An interview with RPN #140 revealed that when a resident exhibits altered skin integrity, a skin assessment should be completed by the RPN. RPN #140 confirmed a skin assessment for resident #015 was not completed.

An interview with the Director of Care (DOC) confirmed that the home's expectation is for staff to complete a skin assessment using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment and this assessment was not completed for resident #015. [s. 50. (2) (b) (i)]

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 a resident who has exhibited altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, 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, to be implemented voluntarily.



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Issued on this 27th day of February, 2017

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

Original report signed by the inspector.