



**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**

**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) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Apr 25, 2018	2018_644507_0009	007531-18	Complaint

Licensee/Titulaire de permis

Villa Colombo Seniors Centre (Vaughan) Inc.
10443 Highway 27, Kleinburg VAUGHAN ON L0J 1C0

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

Villa Colombo Seniors Centre (Vaughan)
10443 Highway 27, Kleinburg VAUGHAN ON L0J 1C0

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

STELLA NG (507)

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): April 10, 2018.
Additionally, off-site interviews were conducted on April 15, 2018.**

**During the course of the inspection, the inspector(s) spoke with the Administrator,
Registered Nurse (RN), Registered Practical Nurse (RPN) and Personal Support
Workers (PSW).**

**During the course of the inspection, the inspector conducted record review of
resident health record and staff schedule.**

**The following Inspection Protocols were used during this inspection:
Personal Support Services**

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)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care

Specifically failed to comply with the following:

- s. 6. (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,**
- (a) a goal in the plan is met; 2007, c. 8, s. 6 (10).**
 - (b) the resident's care needs change or care set out in the plan is no longer necessary; or 2007, c. 8, s. 6 (10).**
 - (c) care set out in the plan has not been effective. 2007, c. 8, s. 6 (10).**

Findings/Faits saillants :

1. The licensee has failed to ensure that the resident was assessed and the plan of care reviewed and revised at least six months and at any other time when, the resident's care needs changed or care set out in the plan was no longer necessary.

On an identified date, the Ministry of Health and Long Term Care (MOHLTC) received a complaint in regards to resident #001's plan of care, specific in the area of eating.

Record review of the progress notes of resident #001 revealed that the resident was assessed by an identified health-related professional on an identified date. The identified health-related professional documented six recommendations on the progress notes on the same day at an identified time in relation to the resident's eating.

Review of resident #001's plan of care revised the next day failed to reveal the recommendations made by the identified health-related professional, as confirmed by interview with staff #101.

In an interview, staff #100 stated that after the assessment conducted by the identified health-related professional on the identified date, staff #100 informed other staff one of the six recommendations made by the identified health-related professional verbally. Staff #100 also stated that the identified health-related professional's other recommendations were not being reviewed and care plan was not updated accordingly during the day shift when resident #001 was assessed. In an interview, staff #101 stated that it was the home's protocol that the health-related professional update the resident's care plan after the assessment, and the registered staff should update the resident's care plan accordingly if the health-related professional had not done so. Staff #101 further stated it was the responsibility of all registered staff on all shifts to ensure the resident's care plan was updated after the health-related professional's assessment.

In interviews, staff #103 and #104 stated staff were not aware that the health-related professional had made six recommendations on the above mentioned identified date relating to resident #001's eating.

The identified health-related professional was not available for interview.

In an interview, staff #102 verified that the home's expectation was that the care plan be updated by the health-related professional after the assessment was conducted, and



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acknowledged that when resident #001's plan of care was not revised accordingly, after the assessment was conducted by the identified health-related professional on the above mentioned identified date. [s. 6. (10) (b)]

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 is assessed and the plan of care reviewed and revised at least six months and at any other time when, the resident's care needs change or care set out in the plan is no longer necessary, to be implemented voluntarily.

Issued on this 2nd day of May, 2018

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

Original report signed by the inspector.