

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

Rapport d'inspection révue 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

Direction de l'amélioration de la performance et de la conformité

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	Licensee Copy/Copie du Titulair	Public Copy/Copie Public		
Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection Complaint		
August 16, 17, 2010	2010_157_9630_16Aug141832	Log #0-000246 Log #0-000992		
Licensee/Titulaire				
Regional Municipality of Durham, 605 Rossland Road, Whitby, ON L1N 6A3 Fax:				
Long-Term Care Home/Foyer de soins de longue durée Hillsdale Terraces, 600 Oshawa Blvd. North, Oshawa, ON L1G 5T9 Fax: (905)579-4420				
Name of Inspector(s)/Nom de l'inspecteur(s) Pat Powers #157, Caroline Tompkins, #166				
Inspection Summary/Sommaire d'inspection				
The purpose of this inspection was to conduct a complaint inspection related to a complaint regarding care and services for a resident and a complaint related to retaliation against a resident related to the filing of care related complaints.				
During the course of the inspection, the inspectors spoke with the Director of Care, Unit Registered Nurse (RN) and Registered Practical Nurse (RPN), Personal Support Workers (PSW's), resident, resident's family/POA, Administrator, Assistant Administrator, the resident's physician.				
During the course of the inspection, the inspectors reviewed the clinical record (medical, nursing and dietary progress notes, plan of care, medications, laboratory tests/results, weight and intake records, power of attorney documentation, observed staff interaction with the resident and tested and observed the operation of resident call system.				
The following Inspection Protocols were used during this inspection: Dignity, Choice and Privacy IP Nutrition and Hydration IP Personal Support Services IP				
One finding of Non-Compliance was found during this inspection. The following action was taken:				
1 WN 1 VPC				



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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 O.Reg.79/10, Section 17(1)(b):

- 17. (1) Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that,
 - (a) can be easily seen, accessed and used by residents, staff and visitors at all times;
 - (b) is on at all times;
 - (c) allows calls to be cancelled only at the point of activation;
 - (d) is available at each bed, toilet, bath and shower location used by residents;
 - (e) is available in every area accessible by residents;
 - (f) clearly indicates when activated where the signal is coming from; and
 - (g) in the case of a system that uses sound to alert staff, is properly calibrated so that the level of sound is audible to staff.
 - (2) A licensee is not required to comply with clause (1) (e) until 12 months after the coming into force of this section.

Findings:

August 17, 2010 - 0945 - Call bell in the resident's room was activated by the Inspector with no response from staff. When activated, the call signal was not audible in the corridor outside of the resident's room. Further investigation identified the following:

- pagers which receive call signals, which are to be carried by nursing staff, were noted to be left at the nursing station of the Unit – Unit RN confirmed that this is a consistent challenge in that staff often do not carry their pagers
- one pager was confirmed not to be operational Unit RN confirmed that this is also a consistent challenge in that pagers do not always function
- the Assistant Administrator advised the Inspector that the signal sound at the nurses station on the unit was set at a very low level
- there is no system in place to monitor the communication response system to ensure that it is operational

Inspector ID #:

157

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 pagers intended to receive call signals are carried by staff and operational at all times, to be implemented voluntarily.



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Signature of Licensee or Representa Signature du Titulaire du représenta		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.
Title:	Date:	Date of Report: (if different from date(s) of inspection).
		Odoba 7,2010