



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

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

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division
 Performance Improvement and Compliance Branch
 Division de la responsabilisation et de la performance du système de santé
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Oct 13, 14, 17, 19, 21, 2011	2011_108110_0007	Complaint

Licensee/Titulaire de permis

MILL CREEK CARE CENTRE
 286 Hurst Drive, BARRIE, ON, L4N-0Z3

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

MILL CREEK CARE CENTRE
 286 Hurst Drive, BARRIE, ON, L4N-0Z3

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

DIANE BROWN (110) GLORIA STILL (164)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with residents, Administrator, Director of Care, registered nursing staff, dietary aides, personal support workers

During the course of the inspection, the inspector(s) monitored lunch meal service, reviewed home's policies and procedures, reviewed health records,

The following Inspection Protocols were used during this inspection:

Training and Orientation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Legend

WN – Written Notification
 VPC – Voluntary Plan of Correction
 DR – Director Referral
 CO – Compliance Order
 WAO – Work and Activity Order

Legendé

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. 71. Menu planning

Specifically failed to comply with the following subsections:

- s. 71. (3) The licensee shall ensure that each resident is offered a minimum of,
- (a) three meals daily;
 - (b) a between-meal beverage in the morning and afternoon and a beverage in the evening after dinner; and
 - (c) a snack in the afternoon and evening. O. Reg. 79/10, s. 71 (3).

Findings/Faits saillants :

1. An identified resident who was not feeling well and remained in her room for lunch on an identified day reported that staff did not offer her a lunch meal. A second identified resident remained in her room during lunch on an identified day was not offered a lunch meal but a cheese sandwich and a drink.[r.71.(3)(a)].

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 218. Orientation

For the purposes of paragraph 11 of subsection 76 (2) of the Act, the following are additional areas in which training shall be provided:

1. The licensee's written procedures for handling complaints and the role of staff in dealing with complaints.
2. Safe and correct use of equipment, including therapeutic equipment, mechanical lifts, assistive aids and positioning aids, that is relevant to the staff member's responsibilities.
3. Cleaning and sanitizing of equipment relevant to the staff member's responsibilities. O. Reg. 79/10, s. 218.

Findings/Faits saillants :

1. An identified registered staff reported that training related to safe and correct use of a identified piece of therapeutic equipment was not part of their orientation. Director of Care stated that a demonstration of the identified equipment is part of the orientation for registered staff.[r. 218.2.]

Issued on this 21st day of October, 2011



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prévus le Loi de 2007 les
foyers de soins de longue

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

Diane Brown

Diane Brown for Gloria Skil

