



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

London Service Area Office
291 King Street, 4th Floor
LONDON, ON, N6B-1R8
Telephone: (519) 675-7680
Facsimile: (519) 675-7685

Bureau régional de services de London
291, rue King, 4ième étage
LONDON, ON, N6B-1R8
Téléphone: (519) 675-7680
Télécopieur: (519) 675-7685

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Table with 3 columns: Date(s) of Inspection, Inspection No, Type of Inspection. Row 1: Oct 2, 16, 24, 2012; 2012_090172_0057; Follow up

Licensee/Titulaire de permis

Oneida Nation of the Thames
2212 Elm Avenue, R. R.#2, SOUTHWOLD, ON, N0L-2G0

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

Oneida Nation of the Thames Long-Term Care Home (Tsi' Nu: yoyantle' Na' Tuhuwatisni)
2212 Elm Avenue, R. R.#2, SOUTHWOLD, ON, N0L-2G0

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

JOAN WOODLEY (172)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

During the course of the inspection, the inspector(s) spoke with Manager of Health and Quality Improvement, 1 Registered Nurse, 3 Registered Practical Nurses, and 2 Personal Support Workers.

During the course of the inspection, the inspector(s) reviewed health care records, daily restraint monitoring forms, policies and procedures, and other relevant documents

The following Inspection Protocols were used during this inspection:

Minimizing of Restraining

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Table with 2 columns: Legend and Legendé. 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



<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>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>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</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 O.Reg 79/10, s. 110. Requirements relating to restraining by a physical device

Specifically failed to comply with the following subsections:

- s. 110. (2) Every licensee shall ensure that the following requirements are met where a resident is being restrained by a physical device under section 31 of the Act:**
- 1. That staff only apply the physical device that has been ordered or approved by a physician or registered nurse in the extended class.**
 - 2. That staff apply the physical device in accordance with any instructions specified by the physician or registered nurse in the extended class.**
 - 3. That the resident is monitored while restrained at least every hour by a member of the registered nursing staff or by another member of staff as authorized by a member of the registered nursing staff for that purpose.**
 - 4. That the resident is released from the physical device and repositioned at least once every two hours. (This requirement does not apply when bed rails are being used if the resident is able to reposition himself or herself.)**
 - 5. That the resident is released and repositioned any other time when necessary based on the resident's condition or circumstances.**
 - 6. That the resident's condition is reassessed and the effectiveness of the restraining evaluated only by a physician, a registered nurse in the extended class attending the resident or a member of the registered nursing staff, at least every eight hours, and at any other time when necessary based on the resident's condition or circumstances. O. Reg. 79/10, s. 110 (2).**

Findings/Faits saillants :

1. Staff interview with a Registered Practical Nurse revealed that no documentation related to a resident with a restraint that would indicate a reassessment of the need and the effectiveness of the restraint is done. She/he confirmed no documentation related to a resident's seat belt restraint is done.
- 2 Staff interview with Registered Nurse revealed her/his understanding of why she/he was required to initial the restraint daily record sheets is to ensure the Personal Support Workers have documented their hourly checks and have signed off correctly for that shift. A Registered Nurse did not demonstrate any understanding that by initially the restraint monitoring sheet she/he was indicating she/he had reassessed the need and the effectiveness of the restraint.
3. Record reviews of daily restraint monitoring sheets of three (3) residents revealed multiple omissions of registered staff initially the reassessment and the effectiveness of the restraint.
[O.Reg 79/10,s.110.(2)6]

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 a resident's condition is reassessed and the effectiveness of the restraining evaluated by the Registered staff at least every eight hours, to be implemented voluntarily.



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Homes Act, 2007

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

Issued on this 24th day of October, 2012

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

Jean A. Woodley RA