

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 London Service Area Office 130 Dufferin Avenue 4th floor LONDON ON N6A 5R2 Telephone: (519) 873-1200 Facsimile: (519) 873-1300 Bureau régional de services de London 130 avenue Dufferin 4ème étage LONDON ON N6A 5R2 Téléphone: (519) 873-1200 Télécopieur: (519) 873-1300

# Public Copy/Copie du public

Report Date(s) / Date(s) du apport

Inspection No /
No de l'inspection

Log # / Registre no Type of Inspection / Genre d'inspection

May 1, 5, 2017

2017\_538144\_0014

002803-17

Complaint

#### Licensee/Titulaire de permis

SHARON FARMS & ENTERPRISES LIMITED 1340 HURON STREET LONDON ON N5V 3R3

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

Earls Court Village 1390 Highbury Avenue North LONDON ON 000 000

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs CAROLEE MILLINER (144)

# 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): March 28, 2017

This complaint inspection was related to the plan of care and staffing.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, Environmental Services Manager, one Registered Nurse, one Registered Practical Nurse and four Personal Support Workers.

During the course of the inspection, one resident clinical record, the home's Point Click Care bulletin board and one service provider report were reviewed.

The following Inspection Protocols were used during this inspection: Nutrition and Hydration Personal Support Services Sufficient Staffing

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 LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care

Specifically failed to comply with the following:

s. 6. (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan. 2007, c. 8, s. 6 (7).

Findings/Faits saillants:



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1. The licensee has failed to ensure that the care set out in the plan of care was provided to a resident as specified in the plan.

The clinical record for a resident included their personal hygiene preference.

On one identified date, the resident's preference was not provided as identified in the plan of care and the resident was involved in an incident.

The Administrator and DOC acknowledged that the decision to provide the resident with a different method for their personal hygiene was the responsibility of the registered staff and that the resident could have been taken to a different resident home area to be provided with their preferred method for personal hygiene.

The home failed to ensure that the care set out in the plan of care was provided to a resident as it related to their choice of bathing.

The severity of this non-compliance was actual harm/risk. The scope of the issue was isolated during the course of this inspection.

There was a compliance history of this legislation being issued as a Compliance Order (CO) on June 13, 2016, April 13, 2016 and January 20, 2016. The Compliance Orders were complied on July 20, 2016.

There was a compliance history of this legislation being issued as a Voluntary Plan of Correction (VPC) and a Written Notification (WN) on December 7, 2015 and June 19, 2015. [s. 6. (7)]

# 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 care set out in the plan of care was provided to a resident as specified in the plan, to be implemented voluntarily.



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Issued on this 5th day of May, 2017

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

Original report signed by the inspector.