



**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 # / Registre no	Type of Inspection / Genre d'inspection
Feb 22, 2017	2017_531518_0003	020773-16	Complaint

Licensee/Titulaire de permis

S & R NURSING HOMES LTD.
265 NORTH FRONT STREET SUITE 200 SARNIA ON N7T 7X1

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

AFTON PARK PLACE LONG TERM CARE COMMUNITY
1200 AFTON DRIVE SARNIA ON N7S 6L6

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

ALISON FALKINGHAM (518)

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): January 20, 2017

This inspection was completed a result of log #020773-16 IL-45335-LO related to concerns about resident care.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care(DOC), the Life Enrichment Manager, one Housekeeper, two Personal Support Workers and two Registered Nurses. The Inspector also reviewed one resident clinical record, the home's policies and procedures, the home's internal investigation related to the family's concerns, the home's communications with the hospital regarding the resident's condition, the activity department's documents related to the resident's participation in activities and observed general and specific staff to resident interactions.

**The following Inspection Protocols were used during this inspection:
Contenance Care and Bowel Management
Personal Support Services
Prevention of Abuse, Neglect and Retaliation**

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 O.Reg 79/10, s. 51. Continence care and bowel management

Specifically failed to comply with the following:

s. 51. (2) Every licensee of a long-term care home shall ensure that, (b) each resident who is incontinent has an individualized plan, as part of his or her plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented; O. Reg. 79/10, s. 51 (2).

Findings/Faits saillants :



1. The licensee has failed to ensure that each resident who was incontinent had individualized plan, as part of his or her plan of care, to promote and manage bowel and bladder incontinence based on the assessment and that the plan of care is implemented.

A resident was admitted to the long term care home with multiple medical conditions. A continence assessment completed at the time of the admission of stated that the resident was continent of bowel and bladder.

The (MDS) assessment for the resident on admission stated that the resident was continent of bowel and bladder.

The most recent plan of care stated that the resident was provided with supervision, cueing every two hours for toileting and the goal was to maintain the resident's ability to use the toilet safely and appropriately.

A progress note stated that the resident had become incontinent of urine and this was the second episode of incontinence that week.

The most recent continence assessment completed stated the resident had a new onset of incontinence.

Interviews with three staff members stated that the plan of care should have been updated to include incontinence of bowel and bladder including goals and outcomes.

The DOC acknowledged that a focus of incontinence should have been included in the plan of care which would have included an individualized plan to manage bowel and bladder continence based on the most recent assessment and the tasks in Point of Care should have included implementation of that plan.

The scope of this issue was isolated. The severity of this issue was determined to be a level two with minimum risk of harm to potential for actual harm to the resident. There have been previous findings of non compliance related to similar areas. [s. 51. (2) (b)]



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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 each resident who is incontinent has an individualized plan, as part of his or her plan of care, to promote and manage bowel and bladder incontinence based on the assessment and that the plan is implemented, to be implemented voluntarily.

Issued on this 23rd day of February, 2017

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

Original report signed by the inspector.