



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

**Rapport d'inspection  
prévue 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

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**Ministère de la Santé et des Soins de  
longue durée**

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Licensee Copy/Copie du Titulaire  Public Copy/Copie Public

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| <b>Date(s) of inspection/Date de l'inspection</b><br>March 3, 2011 | <b>Inspection No/ d'inspection</b><br>2011_159_9536_02Mar170756 | <b>Type of Inspection/Genre d'inspection</b><br>H-00362 |
|--|---|---|

**Licensee/Titulaire**  
The Regional Municipality of Halton  
1151 Bronte Road, Oakville ON L6M 3L1

**Long-Term Care Home/Foyer de soins de longue durée**  
Allendale  
185 Ontario Street South Milton, ON L9T2M3

**Name of Inspector/Nom de l'inspecteur(s)**  
Asha Sehgal

**Inspection Summary/Sommaire d'inspection**

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

During the course of the inspection, the inspector spoke with: Administrator, Director Of Resident Care, Registered Staff, Food Service Supervisor, Dietitian, Resident, and Resident Family.

During the course of the inspection, the inspector reviewed resident health record, lunch meal was observed in one home area.

The following Inspection Protocols were used during this inspection:  
Nutrition and hydration, dining observations.

Findings of Non-Compliance were found during this inspection. The following action was taken:

4 WN  
3 VPC

**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 with LTCHA, 2007, S.O.2007, c 8. s. 6 (10) (b)**  
**The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when, the resident's care needs change or care set out in the plan is no longer necessary.**

**Findings:**

1. The plan of care for identified resident was not revised to reflect the current altered skin integrity status. The plan of care does not include nutritional and nursing interventions related pressure ulcers. Interview with the Registered Nursing staff confirmed that the resident was receiving treatment for pressure ulcers, however, this was not included in the plan of care.
2. Resident was not reassessed and the plan of care reviewed and revised when resident had elevated blood values i.e. low hemoglobin, low red blood cell count.
3. The plan of care for the resident had not been revised to reflect the current status of unplanned weight change over the last 2 months. A review of resident' weight record indicates that the resident had weight gain of 5.5% over 2 months (December 2010- February 2011).
4. The nutritional plan of care for resident was not reviewed and revised when care set out in the plan of care was not effective. Nutrition interventions for the treatment of constipation were not evaluated for effectiveness at the quarterly assessment January 2011. The resident has experienced ongoing constipation without revision to or an evaluation of the dietary interventions.

**Inspector ID #:** 159

**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 with ensuring that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when, the resident's care needs change or care set out in the plan is no longer necessary to be implemented voluntarily.

**WN #2: The Licensee has failed to comply with [LTCHA 2007, S.O 2007, c. 8, s. 6 (1) (c)**  
**Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out, clear directions to staff and others who provide direct care to the resident. 2007, c. 8, s. 6 (1).**

**Findings:**

The plan of care for the resident did not include clear direction for administration of supplement, an intervention for low hemoglobin.

The plan of care for the resident does not provide clear direction to staff related resident's hydration needs. Hydration program was not included in the plan of care for additional fluid needs. Resident's hydration status was not care planned for additional assessed fluid requirement with goals, minimizing and avoiding complication associated with dehydration.

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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 with ensuring that there is a written plan of care for each resident that sets out, clear directions to staff and others who provide direct care to the resident to be implemented voluntarily.

**WN # 3: The Licensee has failed to comply with O.Reg. 79/10, s. 26 (4) (b)**

**The licensee shall ensure that a registered dietitian, who is a member of the staff of the home, completes a nutritional assessment for all residents on admission and whenever there is a significant change in a resident's health condition and assesses the matters referred to in paragraphs 13 and 14 of subsection (3).**

**Findings:**

1. A review of the resident's health record reveals that the resident had unplanned weight change i.e. weight gain of 5.5% over 2 months (December 2010 -February 2011). There was no documentation found to support that the registered dietitian assessed the weight changes, action taken. No referral to the registered dietitian regarding weight gain was documented.
2. Identified resident is documented as having ulcers and has not been assessed by the registered dietitian in relation to skin integrity. Newly identified ulcers in which treatment had been initiated for the resident did not have evidence of assessment by the registered dietitian to indicate type, location, and specific nutritional treatment.

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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 ensuring that a registered dietitian who is a member of the staff of the home, completes a nutritional assessment for all residents on admission and whenever there is a significant change in a resident's health condition and assesses the matters referred to in paragraphs 13 and 14 of subsection (3) to be implemented voluntarily.

**WN # 4: The Licensee has failed to comply with O. Reg. 79/10, s. 231 (b)**

**Every licensee of a long-term care home shall ensure that, the resident's written record is kept up to date at all times.**

**Findings:**

1. Identified resident's written record was not kept up to date. The food and fluid intake record for the month of December 2010 and January 2011 were incomplete i.e. food and or fluid consumption was not documented.
2. Resident did not have weight recorded for the month of January 2011.

