



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

**Rapport d'inspection
prevue 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

Toronto Service Area Office
55 St. Clair Avenue West, 8th Floor
Toronto ON M4V 2Y7

Bureau régional de services de Toronto
55, avenue St. Clair ouest, 8^e étage
Toronto ON M4V 2Y7

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

Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
conformité

Telephone: 416-325-9297
1-866-311-8002
Facsimile: 416-327-4486

Téléphone: 416-325-9297
1-866-311-8002
Télécopieur: 416-327-4486

☐ Licensee Copy/Copie du Titulaire ☒ Public Copy/Copie Public

**Date(s) of inspection/Date de
l'inspection**
January 6, 2011

Inspection No/ d'inspection
2011_144_2263_06Jan120013

Type of Inspection/Genre d'inspection
L-01837 Follow-Up
CI 2262-000021-10

Licensee/Titulaire

Revera Long Term Care Inc. 55 Standish Court, 8th Floor, Mississauga, ON L5R 4B2

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

Banwell Gardens 3000 Banwell Road, Tecumseh, ON N8N 2M4

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

Carolee Milliner (#144)

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a critical incident follow-up investigation.

During the course of the inspection, the inspector(s) spoke with one resident, one RN, one PSW & one RPN /
RAI MDS Coordinator

During the course of the inspection, the inspector reviewed two resident clinical records, the home Resident
Non-Abuse Policy & CI-2263-000021-10.

The following Inspection Protocols were used in part or in whole during this inspection:
Responsive Behaviours

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

1 WN

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avs 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'exigences 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. c.8,s6(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,
(c) clear directions to staff and others who provide direct care to the resident.

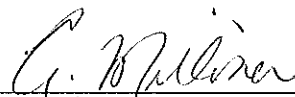
Findings:

1. Clinical record progress notes for one resident identifies behaviour monitoring was initiated in response to a physical altercation with a second resident. There is no further information in the clinical record of resident #1 confirming behaviour monitoring was actually initiated. The written plan of care for Resident #1 does not include behaviour monitoring interventions. One RPN & one PSW on interview gave conflicting responses related to implementation of increased behaviour monitoring.

Inspector ID #: 144

Signature of Licensee or Representative of Licensee
Signature du Titulaire du représentant désigné

Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.



Title:

Date:

Date of Report (if different from date(s) of inspection).
January 7, 2011