

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

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 Sudbury Service Area Office 159 Cedar Street, Suite 603 SUDBURY, ON, P3E-6A5 Telephone: (705) 564-3130 Facsimile: (705) 564-3133 Bureau régional de services de Sudbury 159, rue Cedar, Bureau 603 SUDBURY, ON, P3E-6A5 Téléphone: (705) 564-3130 Télécopieur: (705) 564-3133

Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No I No de l'inspection		Type of Inspection / Genre d'inspection
May 27, 2013	2013_139163_0016	168-13,489- 12,1382/83- 12	Critical Incident System
	Permis MENT OF THE DISTRIC PARRY SOUND, ON, F		OUND WEST

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

BELVEDERE HEIGHTS

21 BELVEDERE AVENUE, PARRY SOUND, ON, P2A-2A2

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

DIANA STENLUND (163)

Inspection Summary/Résumé de l'inspection



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

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 nonrespect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

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, (a) each resident who is incontinent receives an assessment that includes identification of causal factors, patterns, type of incontinence and potential to restore function with specific interventions, and that where the condition or circumstances of the resident require, an assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for assessment of incontinence; O. Reg. 79/10, s. 51 (2).

Findings/Faits saillants:



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

- 1. Inspector reviewed Critical Incident documentation for resident #168 who has a history of incontinence and who had a fall in the bathroom resulting in injury and transfer to hospital. Inspector reviewed the resident's health care record including the plan of care, that indicates resident #168 is incontinent of both bladder and bowel. The inspector was unable to locate in the resident's health care record an assessment of their incontinence. Inspector interviewed a nursing staff member who confirmed that a continence assessment had not been completed. The licensee has not ensured that, each resident who is incontinent receives an assessment that includes identification of causal factors, patterns, type of incontinence and potential to restore function with specific interventions, and that where the condition or circumstances of the resident require, an assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for assessment of incontinence. [s. 51. (2) (a)]
- 2. Inspector reviewed the Critical Incident report for resident #489 with progressive dementia, who fractured their hip and was also incontinent at the time of the incident. Nursing staff reported to the inspector that prior to the fall the resident was partially incontinent and was toileted now and again, however since the fall the resident has become totally incontinent of both bladder and bowel. Upon review of the resident's health care record, the inspector was unable to locate documentation to indicate that an assessment of the resident's incontinence was completed. The licensee has not ensured that, each resident who is incontinent receives an assessment that includes identification of causal factors, patterns, type of incontinence and potential to restore function with specific interventions, and that where the condition or circumstances of the resident require, an assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for assessment of incontinence. [s. 51. (2) (a)]



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

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 residents who are incontinent, specifically residents #168 and #489, receive an assessment that includes identification of causal factors, patterns, type of incontinence and potential to restore function with specific interventions, and that where the condition or circumstances of the resident require, an assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for assessment of incontinence, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 131. Administration of drugs

Specifically failed to comply with the following:

- s. 131. (3) Subject to subsections (4) and (5), the licensee shall ensure that no person administers a drug to a resident in the home unless that person is a physician, dentist, registered nurse or a registered practical nurse. O. Reg. 79/10, s. 131 (3).
- s. 131. (4) A member of the registered nursing staff may permit a staff member who is not otherwise permitted to administer a drug to a resident to administer a topical, if,
- (a) the staff member has been trained by a member of the registered nursing staff in the administration of topicals; O. Reg. 79/10, s. 131 (4).
- (b) the member of the registered nursing staff who is permitting the administration is satisfied that the staff member can safely administer the topical; and O. Reg. 79/10, s. 131 (4).
- (c) the staff member who administers the topical does so under the supervision of the member of the registered nursing staff. O. Reg. 79/10, s. 131 (4).

Findings/Faits saillants:



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

- 1. Inspector was made aware during the inspection that non registered nursing staff have administered drugs to residents. Inspector interviewed a registered nursing staff member who confirmed that they have given oral medications to PSWs to administer to residents. The licensee has not ensured that no person administers a drug to a resident in the home unless that person is a physician, dentist, registered nurse or a registered practical nurse. [s. 131. (3)]
- 2. Inspector was made aware during the inspection that PSWs, who are not registered nursing staff, have been requested to administer topicals to residents without being trained by a member of the registered nursing staff. Inspector interviewed supervisory nursing staff members who confirmed that PSWs have not received training by a member of the registered nursing staff in the administration of topicals. The licensee has not ensured that staff members have been trained by a member of the registered nursing staff in the administration of topicals. [s. 131. (4) (a)]

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 no person administers a drug to a resident in the home unless that person is a physician, dentist, registered nurse or a registered practical nurse and that when PSWs administer topicals, the staff member has been trained by a member of the registered nursing staff, to be implemented voluntarily.

Issued on this 28th day of May, 2013

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

Blana Stenlund #163