

**Inspection Report under
the Long-Term Care
Homes Act, 2007****Rapport d'inspection en vertu de
la Loi de 2007 sur les foyers de
soins de longue durée****Long-Term Care Operations Division
Long-Term Care Inspections Branch****Division des opérations relatives aux
soins de longue durée
Inspection de soins de longue durée**Central East Service Area Office
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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
May 11, 2021	2021_784762_0010	014559-20	Follow up

Licensee/Titulaire de permisBethany Lodge
23 Second Street Markham ON L3R 2C2**Long-Term Care Home/Foyer de soins de longue durée**Bethany Lodge
23 Second Street Markham ON L3R 2C2**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs**

MOSES NEELAM (762)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): April 19 and 20, 2021

**During this inspection the following Follow up inspection intake was inspected:
Log / Compliance Order #001 in report #2020_814501_0005 in relation to
collaboration between staff with regards to the hydration of residents.**

**During the course of the inspection, the inspector(s) spoke with the Director of
Care (DOC), Registered Dietitian (RD), Food Service Manager (FSM), Registered
Nurses (RNs) and Registered Practical Nurses (RPNs).**

**During the course of inspection, the inspector conducted observations of staff and
resident interactions and the provision of care, reviewed health records, and
relevant policies and procedures.**

**The following Inspection Protocols were used during this inspection:
Infection Prevention and Control
Nutrition and Hydration**

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)

**The following previously issued Order(s) were found to be in compliance at the
time of this inspection:**

**Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de
cette inspection:**

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REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
LTCHA, 2007 S.O. 2007, c.8 s. 6. (4)	CO #001	2020_814501_0005		762

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Légende
<p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</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. 8. Policies, etc., to be followed, and records

Specifically failed to comply with the following:

s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,
(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).
(b) is complied with. O. Reg. 79/10, s. 8 (1).

Findings/Faits saillants :

1. The licensee failed to ensure that where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any policy, the licensee is required to ensure that the policy is complied with.

In accordance with s. 68 (2) (a) of O. Reg 79/10, every licensee of a long-term care home shall ensure the programs include, the development and implementation, in consultation with a registered dietitian who is a member of the staff of the home, of policies and procedures relating to hydration.

The Long-Term Care home's (LTCH) hydration policy required the Food Service Manager (FSM) to review resident's hydration status every three days and notify the dietitian, nursing team and physician when fluid is below the required amount of fluid for three consecutive days.

A review of resident #001's, 002's and 003's fluid intake reports indicated that the residents consumed less than the required amount of fluid for three consecutive dates. In an interview, FSM #100 indicated that referrals for these dates were not sent to the dietitian, nursing team and physician for all three residents, as these dates fell on a weekend, however, the reports were sent on weekdays. The residents were not assessed by the dietitian when the resident's fluid were below the required amount for three consecutive days.

Sources: Policy related to hydration; resident fluid reports; Interview with FSM #100 [s. 8. (1) (a),s. 8. (1) (b)]

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 where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any policy, the licensee is required to ensure that policies and procedures relating to hydration is complied with, to be implemented voluntarily.

Issued on this 19th day of May, 2021

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

Original report signed by the inspector.