



**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**

**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**

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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
Mar 19, 2013	2013_139163_0008	10-13	Complaint

Licensee/Titulaire de permis

**BLIND RIVER DISTRICT HEALTH CENTRE
525 Causley Street, P.O. Box 970, BLIND RIVER, ON, P0R-1B0**

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

**BLIND RIVER DISTRICT HEALTH CENTRE - LTC UNIT
525 CAUSLEY STREET, P. O. BOX 970, BLIND RIVER, ON, P0R-1B0**

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

DIANA STENLUND (163)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): March 11-13, 2013

**During the course of the inspection, the inspector(s) spoke with the
Administrator, Director of Care and registered nursing staff.**

**During the course of the inspection, the inspector(s) walked through resident
home areas, observed staff to resident interactions and care and reviewed
staffing policies for nursing and personal support workers.**

**The following Inspection Protocols were used during this inspection:
Sufficient Staffing**



Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE./ NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	WAO – Ordres : travaux et activités
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 non-respect 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. 31. Nursing and personal support services



Specifically failed to comply with the following:

s. 31. (3) The staffing plan must,

(a) provide for a staffing mix that is consistent with residents' assessed care and safety needs and that meets the requirements set out in the Act and this Regulation; O. Reg. 79/10, s. 31 (3).

(b) set out the organization and scheduling of staff shifts; O. Reg. 79/10, s. 31 (3).

(c) promote continuity of care by minimizing the number of different staff members who provide nursing and personal support services to each resident; O. Reg. 79/10, s. 31 (3).

(d) include a back-up plan for nursing and personal care staffing that addresses situations when staff, including the staff who must provide the nursing coverage required under subsection 8 (3) of the Act, cannot come to work; and O. Reg. 79/10, s. 31 (3).

(e) be evaluated and updated at least annually in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices. O. Reg. 79/10, s. 31 (3).

Findings/Faits saillants :

1. On March 11, 2013, the inspector interviewed supervisory staff #101 about the home's written staffing plan for nursing and personal support services. The written staffing plan provided to the inspector did not clearly outline the components required by the legislation for nursing and personal support services. The licensee has failed to ensure that the staffing plan provides a staffing mix that is consistent with resident's assessed care and safety needs, sets out the organization and scheduling of staff shifts, promotes continuity of care by minimizing the number of different staff members who provide nursing and personal support services to each resident, includes a back-up plan for nursing and personal care staffing that addresses situations, including the staff who must provide the nursing coverage required under subsection 8(3) of the Act, cannot come to work, and be evaluated and updated at least annually in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices. [s. 31. (3)]



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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 the staffing plan provides a staffing mix that is consistent with resident's assessed care and safety needs, sets out the organization and scheduling of staff shifts, promotes continuity of care by minimizing the number of different staff members who provide nursing and personal support services to each resident, include a back-up plan for nursing and personal care staffing that addresses situations, including the staff who must provide the nursing coverage required under subsection 8(3) of the Act, cannot come to work, and be evaluated and updated at least annually in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices, to be implemented voluntarily.

Issued on this 19th day of March, 2013

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

Diana Fenlund, #163