

**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 West 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
Feb 18, 2021	2021_835767_0001	021148-20, 000463-21	Critical Incident System

Licensee/Titulaire de permisCorporation of the County of Bruce
30 Park Street Walkerton ON N0G 2V0**Long-Term Care Home/Foyer de soins de longue durée**Brucelea Haven Long Term Care Home - Corporation of the County of Bruce
41 McGivern Street West P.O. Box 1600 Walkerton ON N0G 2V0**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs**

SARAH INGLIS (767)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): January 19, 20, 21 and 22, 2021

The following intakes were completed during the inspection: log #000463-21 and log #021148-20 related to falls.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, Director of Nursing, the Care Coordinator, Registered Nurses, Registered Practical Nurses and Personal Support Workers.

The inspector toured the home, reviewed relevant infection control procedures and practices. Reviewed relevant fall interventions, plan of care, assessments and progress notes. Observed resident fall interventions in place. Observed Infection Control measures in place at the home.

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

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)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Légende</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 LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care

Specifically failed to comply with the following:

s. 6. (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan. 2007, c. 8, s. 6 (7).

Findings/Faits saillants :

1. The licensee failed to ensure that the fall interventions for a resident set out in their plan of care were provided to the resident.

The fall interventions outlined in the resident's plan of care included that hip protectors were to be worn by the resident. The resident had a fall, resulting in an injury. The resident was not wearing hip protectors at the time of the fall because both pairs were not available.

Not wearing hip protectors at the time of the fall may have contributed to the resident's injuries.

Sources: Review of resident's progress notes and care plan, and interviews with staff

I [s. 6. (7)]

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 regarding s. (7) that the care set out in the plan of care is provided to the resident as specified in the plan, to be implemented voluntarily.

Issued on this 18th day of February, 2021

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

Original report signed by the inspector.