



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

**Rapport d'inspection
prévue 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

**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
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<input type="checkbox"/> Licensee Copy/Copie du Titulaire	<input checked="" type="checkbox"/> Public Copy/Copie Public	
Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
March 1, 2011	2011_111_2701_01Mar095812	Complaint (Log#O-001774)
Licensee/Titulaire Caressant-Care Nursing and Retirement Homes Limited, 264 Norwich Avenue, Woodstock, ON N4S 3V9 Fax: 519-539-9601		
Long-Term Care Home/Foyer de soins de longue durée Caressant Care Lindsay Nursing Home, 240 Mary Street West, Lindsay, ON K9V 6L1 Fax: 705-328-3283		
Name of Inspector(s)/Nom de l'inspecteur(s) Lynda Brown, (#111)		
Inspection Summary/Sommaire d'inspection		
<p>The purpose of this inspection was to conduct a complaint inspection for a deceased resident. During the course of the inspection, the inspector spoke with: Three registered nursing staff, one housekeeper, Director of care (DOC) and the Administrator.</p> <p>During the course of the inspection, the inspector: Completed a walk throughout the home, reviewed residents health records, observed treatment carts and medical storage supply rooms.</p> <p>The following Inspection Protocols were used during this inspection: Infection Prevention & Control and Pain.</p> <p><input checked="" type="checkbox"/> Findings of Non-Compliance were found during this inspection. The following action was taken:</p> <p>2 WN</p>		

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit

VPC – Voluntary Plan of Correction/Plan de redressement volontaire

DR – Director Referral/Référant envoyé

CO – Compliance Order/Ordres de conformité

WAO – Work and Activity Order/Ordres: travaux et activités



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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 constitue un avis d'écrit de l'exigence 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 O.Reg. 79/10, s. 52(2) Every licensee of a long-term care home shall ensure that when a residents pain is not relieved by initial interventions, the resident is assessed using a clinically appropriate assessment instrument specifically designed for this purpose.

Findings:

An identified resident at risk for pain was not assessed when the pain was not relieved by initial interventions and did not receive adequate pain management.

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WN #2: The Licensee has failed to comply with O.Reg. 79/10, 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 all applicable requirements under the Act; and
- (b) is complied with.

Findings:

Under O.Reg. 79/10, s. 48

(1) Every licensee of a long-term care program shall ensure that the following interdisciplinary programs are developed and implemented in the home:

- 4. A pain management program to identify pain in residents and manage pain.
- (2) Each program must, in addition to meeting the requirements set out in section 30,
 - (b) provide for assessment and reassessment instruments.

-The homes policy 'Pain Assessment" indicates under procedure Part A:

- 1. The Caressant Care Pain Assessment Tool on PointClickCare (PCC) will be utilized when: a new pain medication is initiated, a resident exhibits distress related behaviours or facial grimace and a family/staff/volunteers indicate pain is present.

-An identified resident at risk for pain did not receive a pain assessment as indicated under the homes policy.

-The homes policy was not complied with.

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**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.**

Syndra Brown
May 26, 2011