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
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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
Sep 10, 2014	2014_365194_0015	000887-14,000814-14	Follow up

Licensee/Titulaire de permis

CARESSANT-CARE NURSING AND RETIREMENT HOMES LIMITED
264 NORWICH AVENUE, WOODSTOCK, ON, N4S-3V9

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

CARESSANT CARE ON MCLAUGHLIN ROAD
114 McLaughlin Road, LINDSAY, ON, K9V-6L1

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

CHANTAL LAFRENIERE (194)

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): September 2,3,4,5 2014

During the course of this inspection the following Critical Incident was completed Log #O-000814-14. Critical Incident Log #O-000443-14 was inspected under inspection # 2014_365194_0013 with non compliance issued under this inspection.

During the course of the inspection, the inspector(s) spoke with Administrator, Regional Manager, Director of Care (DOC), Registered Practical Nurse (RPN), Personal Support Worker(PSW)and Resident.

During the course of the inspection, the inspector(s) reviewed the internal investigation notes, critical incident reports, compliance plan, staffing educational records, licensee's policy on Abuse and Critical Incident Reporting, clinical health records for identified resident.

The following Inspection Protocols were used during this inspection:
Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	Legendé WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité 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.) The following constitutes written notification of non-compliance under paragraph 1 of section 152 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. 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 LTCHA, 2007 S.O. 2007, c.8, s. 23. Licensee must investigate, respond and act

Specifically failed to comply with the following:

s. 23. (2) A licensee shall report to the Director the results of every investigation undertaken under clause (1) (a), and every action taken under clause (1) (b). 2007, c. 8, s. 23 (2).

Findings/Faits saillants :

1. The licensee has failed to ensure that the results of the abuse/neglect investigation were reported to the Director.

Log #O-000814-14

On an identified date Resident #1 was left unattended on the toilet for approximately one hour. Staff #104 and #105 had mechanically transferred the resident and left their shift without assisting resident off the toilet. Resident #1 was assisted off the toilet by the next shift.

Staff #104 stated during an interview that resident #1 had been left unattended on the toilet.

MOHLTC were notified of the incident by telephone immediately and Critical Incident Report was submitted 4 days later.

During an interview with DOC she stated that the results of the investigation had not been reported to the Director. [s. 23. (2)]

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 by ensuring to report to the Director the results of every investigation undertaken for abuse or neglect, to be implemented voluntarily.

WN #2: 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. This area of non compliance was issued July 31, 2014 to the home during inspection # 2014-360111_0018 under CO #001 with a compliance date of October 01, 2014.

Log #O-000814-14

The licensee failed to ensure that the care set out in the plan of care for Resident #1 was provided as specified in the plan.

The plan of care for Resident #1 directs;
 - the Resident requires 2 staff for a mechanical lift transfer.
 - the Resident requires extensive assistance X 2 staff with transferring on/off toilet using sit to stand lift.
 - the Resident cannot be left unattended on toilet, as resident attempts to self transfer increasing risk for falls/injuries.

On an identified date, Resident #1 was left on the toilet unattended by Staff #105. The resident did not have any injuries.

Staff #104 stated during an interview that resident #1 had been left unattended on the toilet..

Log#O-000443-14

The licensee has failed to ensure that the care set out in the plan of care for Resident #6 was not provided to the resident as specified in the plan.

Nursing Care Plan History for Resident #6 directs;
TRANSFERS: Total Dependence: Resident recently has an injury, and is experiencing ++ pain. The resident cannot weight bear and is transferred using the full patient transfer lift, x2 staff. (for an identified date)
TRANSFERS: Total Dependence: Resident recently has an injury, and is experiencing ++ pain. The resident cannot weight bear and is transferred using the full patient transfer lift, x2 staff. (dated 4 days later)

POST FALL ASSESSMENT completed by PT the day after diagnosis of injury for Resident # 6 directs;
Condition #1:Decreased mobility
Condition #2:changed transfer status.
Goal #1:To improve mobility over the next quarter.
Goal #2:To improve transfer status over the next quarter.

Plan: 3x/week with PTA.
1.AAROM for LE'S 8-10reps/1set (within pain limit)
2.After one week initiate standing at rail with weight bearing as tolerated.
3.Third week start two assist ambulation with 4ww+wheelchair following as tolerated. (weight bearing as tolerated)
4.PT recommend Full lift for all transfer at this time, will reassess as needed

Progress notes dated six days after diagnosis of injury by RCC stated that staff have been toileting resident #6 with sit/stand lift since her return from hospital with a diagnosis of an injury. During an interview the RCC stated that after the resident's second fall six days after diagnosis of an injury, RCC was assisting staff to toilet Resident # 6 when RCC became aware that the staff had been using a sit/stand lift for transfer with the resident after the physio assessment recommended that staff use a full lift transfer with the resident.

(PLEASE NOTE: This evidence of non-compliance was found during Inspection #2014_365194_0013) [s. 6. (7)]

THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/
LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT CONFORME AUX EXIGENCES:

COMPLIED NON-COMPLIANCE/ORDER(S) REDRESSEMENT EN CAS DE NON-RESPECT OU LES ORDERS:			
REQUIREMENT/ EXIGENCE	**TYPE OF ACTION/ GENRE DE MESURE**	**INSPECTION # / NO DE L'INSPECTION**	**INSPECTOR ID #/ NO DE L'INSPECTEUR**
LTCHA, 2007 S.O. 2007, c.8 s. 24. (1)	CO #002	2013_220111_0009	194
LTCHA, 2007 S.O. 2007, c.8 s. 24. (1)	CO #002	2013_220111_0023	194
LTCHA, 2007 S.O. 2007, c.8 s. 24. (1)	CO #004	2014_360111_0018	194

Issued on this 10th day of September, 2014

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