



Ministry of Health and
Long-Term Care

Ministère de la Santé et des
Soins de longue durée

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

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

Ottawa Service Area Office
347 Preston St, 4th Floor
OTTAWA, ON, K1S-3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347, rue Preston, 4^{ième} étage
OTTAWA, ON, K1S-3J4
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Télécopieur: (613) 569-9670

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 |
|--|---|---------------------------------|--|
| Dec 10, 2013 | 2013_225126_0033 | O-000377- 13,O- 000412-13 | Follow up |

Licensee/Titulaire de permis

REVERA LONG TERM CARE INC.
55 STANDISH COURT, 8TH FLOOR, MISSISSAUGA, ON, L5R-4B2

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

CARLINGVIEW MANOR
2330 CARLING AVENUE, OTTAWA, ON, K2B-7H1

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

LINDA HARKINS (126)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): November 21, 22 and 26, 2013

During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care, Clinical Care Manager, several Registered Nurses, Registered Practical Nurses, several Personal Support Workers and one resident

During the course of the inspection, the inspector(s) Reviewed three resident health care records and observed application of restraints on resident.

During the course of this inspection, there was a follow up to 3 Compliance Orders.

The following Inspection Protocols were used during this inspection:
Continence Care and Bowel Management

Minimizing of Restraining

Personal Support Services

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 |



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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. 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 comply with LTCHA 2007, S.O. 2007, c.8, s. 6 (7) in that the licensee did not ensure the care set out in the plan of care was provided to Resident #1 as specified in the plan.

On May 9, 2013 a Compliance Order was issued to the licensee to ensure that the care set out in the plan of care be provided to Resident #1 as specified in the plan, as related to bowel management, with a compliance date of June 24, 2013. A follow up inspection to the home was carried out on November 22, 2013.

The health care record of Resident #1 was reviewed and the following was found: The Care plan dated a specify day in June 2013 and October 2013 indicated that: " The registered staff on the evening shift is to check with Personal Support Worker flow sheet to monitor for bowel movement(BM) and if no BM for 3 days is to follow through with bowel protocol in place and document the result on the medication administration sheet (MARS)."

The bowel protocol as per physician order indicates the following:

Bowel Protocol 1: Milk of Magnesia 40mg/5ml. If no bowel movement for 3 days give 30 mls by mouth.

Bowel Protocol 2: Dulcolax 10 mg suppositories if no bowel movement in 4 days insert 1 suppository rectally.

Bowel Protocol 3: Sodium Phosphate Enema if no results with Milk of Magnesia or Dulcolax Suppository insert 1 enema rectally.

The MDS Monitoring and Observation Record, the MARS and the Individual Resident Care Orders sheet was reviewed for the month of September and October 2013.

It is noted that Resident #1 did not have a BM for a specified period in September 2013 . There are no bowel interventions documented for the 5 days.

It is noted that Resident #1 did not have a BM for a specified period in October 2013. There are no bowel interventions documented for the 6 days.

Resident #1 bowel protocol as set out in his plan of care was not provided to the resident as specified in the plan.



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LTCHA 2007, c.8,s.6(7) has been previously issued on May 9,2013 with a compliance order (CO), March 4, 2013 (with VPC), December 7, 2012(with VPC), July 24, 2012, December 2, 2011, September 20, 2011, July 8, 2011 and February 1, 2011. [s. 6. (7)]

Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".

**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. 19. (1) | CO #001 | 2013_200148_0018 | 126 |
| LTCHA, 2007 S.O. 2007, c.8 s. 6. (1) | CO #001 | 2013_199161_0013 | 126 |

Issued on this 10th day of December, 2013

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





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Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007*, S.O. 2007, c.8

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

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

Public Copy/Copie du public

Name of Inspector (ID #) /
Nom de l'inspecteur (No) : LINDA HARKINS (126)

Inspection No. /
No de l'inspection : 2013_225126_0033

Log No. /
Registre no: O-000377-13,O-000412-13

Type of Inspection /
Genre d'inspection: Follow up

Report Date(s) /
Date(s) du Rapport : Dec 10, 2013

Licensee /
Titulaire de permis : REVERA LONG TERM CARE INC.
55 STANDISH COURT, 8TH FLOOR, MISSISSAUGA,
ON, L5R-4B2

LTC Home /
Foyer de SLD : CARLINGVIEW MANOR
2330 CARLING AVENUE, OTTAWA, ON, K2B-7H1

Name of Administrator /
Nom de l'administratrice
ou de l'administrateur : CATHY DROUIN

To REVERA LONG TERM CARE INC., you are hereby required to comply with the following order(s) by the date(s) set out below:



Ministry of Health and
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Ministère de la Santé et
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Order(s) of the Inspector
Pursuant to section 153 and/or
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Ordre(s) de l'inspecteur
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de l'article 154 de la *Loi de 2007 sur les foyers
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Order # /
Ordre no : 001 **Order Type /**
Genre d'ordre : Compliance Orders, s. 153. (1) (b)

Linked to Existing Order /
Lien vers ordre existant: 2013_199161_0013, CO #002;

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, 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).

Order / Ordre :

The licensee shall prepare, submit and implement a plan for achieving compliance to ensure that care set out in the plan of care is provided to Resident #1 as specified in the plan, as related to bowel management. The plan shall define the process for monitoring the implementation of the bowel protocol. This plan must be submitted in writing to Inspector Linda Harkins at 347 Preston Street, 4th Floor, Ottawa, Ontario K1S 3J4 or by fax at 1-613-569-9670 on or before December 20, 2013.

Grounds / Motifs :

1. 1. The licensee failed to comply with LTCHA 2007, S.O. 2007, c.8, s. 6 (7) in that the licensee did not ensure the care set out in the plan of care was provided to Resident #1 as specified in the plan.

On May 9, 2013 a Compliance Order was issued to the licensee to ensure that the care set out in the plan of care be provided to Resident #1 as specified in the plan, as related to bowel management, with a compliance date of June 24, 2013. A follow up inspection to the home was carried out on November 22, 2013.

The health care record of Resident #1 was reviewed and the following was found: The Care plan dated a specify day in June 2013 and October 2013 indicated that: " The registered staff on the evening shift is to check with Personal Support Worker flow sheet to monitor for bowel movement(BM) and if no BM for 3 days is to follow through with bowel protocol in place and document the result on the medication administration sheet (MARS)."



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The bowel protocol as per physician order indicates the following:

Bowel Protocol 1: Milk of Magnesia 40mg/5ml. If no bowel movement for 3 days give 30 mls by mouth.

Bowel Protocol 2: Dulcolax 10 mg suppositories if no bowel movement in 4 days insert 1 suppository rectally.

Bowel Protocol 3: Sodium Phosphate Enema if no results with Milk of Magnesia or Dulcolax Suppository insert 1 enema rectally.

The MDS Monitoring and Observation Record, the MARS and the Individual Resident Care Orders sheet was reviewed for the month of September and October 2013.

It is noted that Resident #1 did not have a BM for a specified period in September 2013 . There are no bowel interventions documented for the 5 days.

It is noted that Resident #1 did not have a BM for a specified period in October 2013. There are no bowel interventions documented for the 6 days.

Resident #1 bowel protocol as set out in his plan of care was not provided to the resident as specified in the plan.

LTCHA 2007, c.8,s.6(7) has been previously issued on May 9,2013 with a compliance order (CO), March 4, 2013 (with VPC), December 7, 2012(with VPC), July 24, 2012, December 2, 2011, September 20, 2011, July 8, 2011 and February 1, 2011. [s. 6. (7)] (126)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Jan 08, 2014



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REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

Director
c/o Appeals Coordinator
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603



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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the Director

Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

Director
c/o Appeals Coordinator
Performance Improvement and Compliance
Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.



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RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

La demande de réexamen doit être présentée par écrit et est signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au titulaire de permis.

La demande de réexamen doit contenir ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le titulaire de permis souhaite que le directeur examine;
- c) l'adresse du titulaire de permis aux fins de signification.

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11^e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



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En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la
conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this 10th day of December, 2013

**Signature of Inspector /
Signature de l'inspecteur :**

Name of Inspector /

Nom de l'inspecteur : LINDA HARKINS

Service Area Office /

Bureau régional de services : Ottawa Service Area Office