



Hamilton Service Area Office
 119 King Street West, 11th Floor
 Hamilton, ON L8P 4Y7

Bureau régional de services de Hamilton
 119, rue King Ouest, 11^{ième} étage
 Hamilton, ON L8P 4Y7

Telephone: 905-546-8294
 Facsimile: 905-546-8255

Téléphone: 905-546-8294
 Télécopieur: 905-546-8255

Inspection Report under the LTC Homes Act, 2007 <input checked="" type="checkbox"/> Public Copy <input type="checkbox"/> Licensee Copy		Rapport d'inspection prévue de la Loi de 2007 les foyers de soins de longue durée <input type="checkbox"/> Copie du Titulaire <input checked="" type="checkbox"/> Copie de la Publique	
Date(s) of inspection/Date de l'inspection August 17, 2010		Inspection No/ d'inspection 2010_146_9604_16Aug160926	Type of Inspection/Genre d'inspection CIS report M604-000015-10 H - 00445 - 2010
Licensee/Titulaire Regional Municipality of Niagara, 2201 St David's Road, Thorold, L2V 3Z3			
Long-Term Care Home/Foyer de soins de longue durée Douglas H. Rapelje Lodge, 277 Plymouth Road, Welland, ON L3B6E3			
Name of Inspector(s)/Nom de l'inspecteur(s) Barbara Naykalyk-Hunt – LTC Homes Inspector – Nursing #146			
Inspection Summary/Sommaire d'inspection			
<p>The purpose of this inspection was to conduct an other/Critical Incident inspection</p> <p>The inspection was conducted by the above named inspector.</p> <p>The inspection occurred on August 17, 2010.</p> <p>During the course of the inspection, the inspector(s) spoke with: DOC, RPN, PSW,</p> <p>The following Inspection Protocols were used in part or in whole during this inspection: Falls prevention</p> <p>1 Finding of Non-Compliance was found during this inspection. The following action was taken: 1 WN</p>			

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 constituer un avis d'écrit de l'exigences 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.

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Plan of correction/Plan de redressement
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

WN#1: The Licensee has failed to comply with: O. Reg. 79/10, s. 49 (2)

Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that where the condition or circumstances of the resident require, a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls.

Findings:

The charting for a resident who had fallen 2 days previous stated that the resident had difficulty ambulating. This symptom of difficulty ambulating was not further assessed for another 3 days. An x-ray 5 days after the fall revealed a fractured hip.

Signature of Licensee of Designated Representative
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.



Title:

Date:

Date of Report (If different from date(s) of inspection).