Ontario

Ministry of Long-Term Care

Ministère des Soins de longue durée

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

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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
Sep 24, 2020	2020_805638_0011	012514-20, 012515-20, 012516-20	Follow up

Licensee/Titulaire de permis

The Board of Management for the District of Parry Sound East
62 Big Bend Avenue Box 400 POWASSAN ON P0H 1Z0

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

Eastholme Home for the Aged
62 Big Bend Avenue P.O. Box 400 POWASSAN ON P0H 1Z0

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

RYAN GOODMURPHY (638), MICHELLE BERARDI (679)

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 14 - 17, 2020.

The following intakes were inspected during this Follow Up inspection;
-One log, which was a follow up from inspection report #2020_752627_0007, related to Compliance Order (CO) #001 regarding s. 6 (7) of the Long-Term Care Homes Act (LTCHA), 2007, and the implementation of the resident specific plan of care;
-One log, which was a follow up from inspection report #2020_752627_0007, related to CO #002 regarding s. 6 (10) of the LTCHA 2007, and the revision of the plan of care when required; and
-One log, which was a follow up from inspection report #2020_752627_0008, related to CO #001 regarding s. 16 of the Ontario Regulation (O.Reg.) 79/10, and the security of windows in the home.

Please note a CIS inspection (#2020_805638_0010) was conducted concurrently with this Follow Up inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Nursing and Personal Care (DONPC), Assistant Director of Care, Assistant Administrator/Environmental Services Manager, Registered Nurses (RN), Registered Practical Nurses (RPN), Personal Support Workers (PSW), Housekeeping staff, Custodian staff, Dietary staff, residents and their families.

The Inspector(s) also conducted a daily tour of resident care areas, observed the provision of care and services to the residents, as well as staff to resident interactions. Inspector(s) reviewed relevant resident health care records, progress notes, home records and policies and procedures.

The following Inspection Protocols were used during this inspection:
Falls Prevention
Personal Support Services
Safe and Secure Home

During the course of this inspection, Non-Compliances were issued.

- **1 WN(s)**
- **0 VPC(s)**
- **0 CO(s)**
- **0 DR(s)**
- **0 WAO(s)**

The following previously issued Order(s) were found to be in compliance at the time of this inspection:
Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / NO DE L'INSPECTION	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 16.	CO #001	2020_752627_0008	679
LTCHA, 2007 S.O. 2007, c.8 s. 6. (10)	CO #002	2020_752627_0007	638
LTCHA, 2007 S.O. 2007, c.8 s. 6. (7)	CO #001	2020_752627_0007	638

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	Légende 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. 6. Plan of care

Specifically failed to comply with the following:

s. 6. (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,
(a) the planned care for the resident; 2007, c. 8, s. 6 (1).
(b) the goals the care is intended to achieve; and 2007, c. 8, s. 6 (1).
(c) clear directions to staff and others who provide direct care to the resident. 2007, c. 8, s. 6 (1).

Findings/Faits saillants :

1. The licensee has failed to ensure a resident's written plan of care provided clear direction to direct care staff.

One resident had the potential for altered skin integrity and required specific interventions to minimize their risk of skin breakdown. The resident's care plan identified the resident required one padded heel boot to one heel to prevent skin breakdown, but did not specify any times in which it was to be implemented. The resident's electronic medication administration record (eMAR) identified the resident was supposed to have padded heel boots to both heels.

During interviews with staff, they were uncertain of the specifics surrounding the resident's padded heel boots. The Inspector observed the resident without their padded heel boots applied. The DONPC identified that a lack of clarity and differing directives in the plan of care could have caused confusion regarding when and how to apply the resident’s padded heel boots.

Sources: Inspector #638's observations; resident's plan of care, specifically the care plan, eMAR and progress notes; and interviews with the DONPC and other staff. [s. 6. (1) (c)]

Issued on this 25th day of September, 2020

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

Original report signed by the inspector.