

Ministry of Long-Term Care
Long-Term Care Operations Division
Long-Term Care Inspections Branch

London District
130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

| Original Public Report | |
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| Report Issue Date: July 31, 2023 | |
| Inspection Number: 2023-1543-0003 | |
| Inspection Type: Complaint Critical Incident System | |
| Licensee: Corporation of the County of Elgin | |
| Long Term Care Home and City: Elgin Manor, St Thomas | |
| Lead Inspector Cheryl McFadden (745) | Inspector Digital Signature |
| Additional Inspector(s) Kristen Murray (731) | |

| INSPECTION SUMMARY |
|---|
| <p>The inspection occurred onsite on the following date(s): July 24, 25, 26, 2023 The inspection occurred offsite on the following date(s): July 27, 2023</p> <p>The following intake(s) were inspected:</p> <ul style="list-style-type: none"> • Intake: #00085273 -complaint: related to skin and wound care, oral care, medication administration, plan of care, responsive behaviours, and qualifications of staff. • Intake: #00086979 -related to fall of a resident. • Intake: #00087611 -related to Improper/Incompetent treatment of a resident. |

The following **Inspection Protocols** were used during this inspection:

- Resident Care and Support Services
- Skin and Wound Prevention and Management
- Medication Management
- Infection Prevention and Control
- Responsive Behaviours
- Falls Prevention and Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Skin and Wound

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (iv)

The licensee has failed to ensure that a resident, who was experiencing altered skin integrity, was reassessed at least weekly by a member of the registered nursing staff.

Rationale and Summary

A resident had an area of altered skin integrity and a weekly wound assessment was not completed. The home's Skin Care and Wound Management policy stated that residents with areas of altered skin integrity were to have a wound assessment completed weekly by a registered staff member, including the size, discharge from the wound, appearance, progression, pain, nutrition, and equipment being used.

In separate interviews, a Registered Practical Nurse (RPN) and the Resident Care Coordinator (RCC) identified that a weekly skin and wound assessment had not been completed for the area of altered skin integrity.

There was minimal risk to the resident related to the weekly wound assessment not being completed.

Sources: The home's Skin Care and Wound Management Policy, last revised June 2023; Clinical records for a resident, including assessments and treatment administrator records; and interviews with a RPN and the RCC.

[731]