



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 prévue le Loi de 2007 les foyers de soins de longue

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

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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Includes handwritten date Oct. 23/12 and inspection number 2012_105130_0032.

Licensee/Titulaire de permis
FOYER RICHELIEU WELLAND
655 Tanguay Ave, WELLAND, ON, L3B-6A1

Long-Term Care Home/Foyer de soins de longue durée
FOYER RICHELIEU WELLAND
655 TANGUAY AVENUE, WELLAND, ON, L3B-6A1

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs
GILLIAN TRACEY (130)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Complaint inspection.

During the course of the inspection, the inspector(s) spoke with The Administrator, Director of Finance, Registered Staff, personal support workers and residents.

During the course of the inspection, the inspector(s) interviewed staff and residents, observed care and reviewed clinical records and staff schedules related to H-002303-11.

The following Inspection Protocols were used during this inspection:

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Table with 2 columns: Legend and Legendé. Lists various codes like WN, VPC, DR, CO, WAO and their corresponding French descriptions.

<p>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.)</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>
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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 subsections:

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;
(b) the goals the care is intended to achieve; and
(c) clear directions to staff and others who provide direct care to the resident. 2007, c. 8, s. 6 (1).

s. 6. (2) The licensee shall ensure that the care set out in the plan of care is based on an assessment of the resident and the needs and preferences of that resident. 2007, c. 8, s. 6 (2).

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 did not ensure that the care set out in the plan of care was provided to the resident as specified in the plan. The toileting plan for resident #1 indicated the resident was to be toileted every 2 hours and after meals. In 2012 the resident was observed over a 4 hour period, during which time the resident was toileted once. According to staff interviewed, the resident is only toileted once per shift.
2. The licensee did not ensure that the care set out in the plan was based on the needs and preferences of that resident. The continence/toileting plan for resident #3 indicated the resident was incontinent and required disposable briefs, however according to statements from staff, the resident is not incontinent and does not wear disposable briefs.
3. The licensee did not ensure that there was a written plan of care for each resident that set out clear directions to staff and others who provide direct care to the resident. The plan of care for resident #3 indicated the resident was on a scheduled toileting plan, however, the plan did not specify the details surrounding the plan. Staff interviewed were not aware of a scheduled toileting plan in place.

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 to ensure that care set out in the plan is provided to the resident as specified in the plan, that the plan is based on the assessed needs and preferences of the resident and that the plan provides clear directions to staff and others who provide direct care to the resident, to be implemented voluntarily.

Issued on this 7th day of November, 2012



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prévus le Loi de 2007 les
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Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs

A handwritten signature in cursive script, appearing to read "J. Tracy".