



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
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Table with 3 columns: Date(s) of Inspection, Inspection No, Type of Inspection. Row 1: May 16, 29, Jun 12, 27, Jul 13, 31, Aug 2, 21, 22, 24, 2012; 2012_066107_0009; Complaint

Licensee/Titulaire de permis

GRACE VILLA LIMITED
284 CENTRAL AVENUE, LONDON, ON, N6B-2C8

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

GRACE VILLA NURSING HOME
45 LOCKTON CRESCENT, HAMILTON, ON, L8V-4V5

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

MICHELLE WARRENER (107), RICHARD HAYDEN (127), TAMMY SZYMANOWSKI (165), YVONNE WALTON (169)

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 Care (DOC), Assistant Director of Care (ADOC), Nutrition Manager (NM), Food Service Supervisor (FSS), Programs Manager, Pastoral Care Co-ordinator, Payroll/Scheduling Clerk, Accounting Clerk, Maintenance Manager, Social Worker, Ward Clerk, Assessment and Documentation Manager, front line nursing and dietary staff on all floors, numerous residents and family members

During the course of the inspection, the inspector(s) Observed resident care, meal service, laundry, and housekeeping practices, reviewed clinical health records and relevant policies and procedures related to complaint inspections H-002426-11, H-000094-12, H-000165-12, H-000900-12, H-000615-12, H-000860-12. All non-compliances related to these complaints were issued as part of the Resident Quality Inspection (RQI) report H-000806-12 as noted below:

H-000900-12, H-000615-12, report #2012_066107_009:

Seven non-compliances were found related to the licensee's failure to ensure that the care outlined in the plan of care was provided to the resident as specified in the plan; failure to fully respect and promote the resident's right to give or refuse consent to any treatment, care or service for which consent was required by law; failure to ensure that all food was prepared and served using methods that preserved taste, nutritive value, appearance and food quality; that menu items were prepared according to the planned menu; the home's Fall/Winter menus did not provide for adequate fibre based on the current Dietary Reference Intake (DRI) of 30 grams for males aged 70+, as per Health Canada and did not provide for a variety of foods each day from all food groups in keeping with Canada's Food Guide; not all residents were offered the planned menu items at meals and snacks;



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the menu cycle did not include alternate beverage choices at both meals and snacks; and the Fall/Winter menu cycle was not approved by a Registered Dietitian who was a member of the staff of the home. These non-compliances were issued in the Resident Quality Inspection report 2012-066107-0008 initiated May 1, 2012 and are contained in the report of that inspection.

Legislative References:

LTCHA, 2007, S.O. 2007, c.8, s. 6(7), s. 3(1)11.11

O.Reg. 79/10, s. 72(3)(a), 72(2)(d), 71(2)(a)(b), 71(4), 71(1)(d)(e)

H-002426-11, reports #2012-149165-0002, 2012_066107_0009:

Three non-compliances were found related to the licensee's failure to ensure that residents exhibiting altered skin integrity were reassessed at least weekly by a member of the registered nursing staff, the licensee's failure to ensure residents were reassessed and their plans of care reviewed and revised at least every six months and at any other time when, the care set out in the plan was not effective, and the licensee's failure to ensure that all residents who were incontinent had their bowel and bladder continence plan implemented. These non-compliances were issued in the Resident Quality Inspection report 2012-066107-0008 initiated May 1, 2012 and are contained in the report of that inspection.

Legislative References:

LTCHA, 2007, S.O. 2007, c.8, s. 6(10)(c)

O.Reg. 79/10, s. 50(2)(b)(iv), s. 8(1)(b),

O.Reg. 79/10, s. 51(2)(b)

H-000165-12, report #2012_105130_0010:

Two non-compliances were found related to the licensee's failure to ensure that the resident's right to be treated with courtesy and respect and in a way that fully recognized their individuality and respected their dignity, and failed to ensure that the Director was informed no later than one business day after the occurrence of an incident for which a resident was injured and taken to hospital.

These non-compliances were issued in the Resident Quality Inspection report 2012-066107-0008 initiated May 1, 2012 and are contained in the report of that inspection.

Legislative References:

LTCHA, 2007, S.O. 2007, c.8, s. 3(1)1

O.Reg. 79/10, s. 107(3)4

The following Inspection Protocols were used during this inspection:

Accommodation Services - Housekeeping

Accommodation Services - Maintenance

Continence Care and Bowel Management

Falls Prevention

Food Quality

Nutrition and Hydration

~~There are no findings of Non-Compliance as a result of this inspection.~~ *mw*

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<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>

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:

CORRECTED 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. 11.	CO #001	2011_066107_0002	107
O.Reg 79/10 r. 26.	CO #009	2011_066107_0002	107
O.Reg 79/10 r. 72.	CO #006	2011_066107_0002	107

Issued on this 24th day of August, 2012

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

L. Wanevich, RD