



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: Sept 8, 2011, Sept 1, 2011, 2011\_105130\_0008, Complaint

Licensee/Titulaire de permis

THE CORPORATION OF HALDIMAND COUNTY
45 Munsee Street, Box 400, Cayuga, ON, N0A-1E0

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

GRANDVIEW LODGE / DUNNVILLE
657 LOCK STREET WEST, DUNNVILLE, ON, N1A-1V9

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

GILLIAN HUNTER (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 Care (DOC), Registered Nurse and Personal Support Workers (PSW) and the resident. Regarding inspection H-001828-11

During the course of the inspection, the inspector(s) Reviewed the resident's clinical record, interviewed the Administrator, Director of Care, Registered Nurse and Personal Support Workers.

The following Inspection Protocols were used in part or in whole during this inspection:

Continence Care and Bowel Management

Dignity, Choice and Privacy

Personal Support Services

Skin and Wound Care

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



<p><b>Definitions</b></p> <p>WN – Written Notification  VPC – Voluntary Plan of Correction  DR – Director Referral  CO – Compliance Order  WAO – Work and Activity Order</p>	<p><b>Définitions</b></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>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>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</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>

**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. (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 sayants :**

1. The care set out in the plan is not provided to the identified resident as specified in the plan. The resident's plan of care specifies that at 0800, the resident is to receive am care, personal hygiene, staff to toilet and apply incontinent product. At 1330-1400 staff are to toilet and change incontinent product if needed and lay resident down for afternoon nap. At 1930-2000, staff are to toilet , brush teeth, provide personal hygiene and transfer the resident to bed. Staff interviewed on September 1, 2011 reported this morning, the resident received am care, was toileted and put in the wheelchair by night shift staff at approximately 0600-0630 and was not toileted again until 1000-1030. The restraint documentation records for August 2011 reviewed for the identified resident indicate the resident was up in the wheelchair from approximately 0700 to 2000, on 18 occasions, with no evidence of an afternoon nap. The DOC reviewed the record and acknowledged the resident did not have a nap on those occasions.

**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 the care set out in the plan of care is provided to the residents, to be implemented voluntarily.**

**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 41. Every licensee of a long-term care home shall ensure that each resident of the home has his or her desired bedtime and rest routines supported and individualized to promote comfort, rest and sleep. O. Reg. 79/10, s. 41.**

**Findings/Faits sayants :**

1. The identified resident's desired bedtimes and rest routine are not supported and individualized to promote comfort, rest and sleep. The PSWs reported that on the identified home area the night staff provide am care and get up one half of the residents on the first of the month until the 15th of the month and day shift provide am care and get up the remainder of the residents. Staff report this routine is rotated monthly to allow all residents the opportunity to sleep in. Residents individualized rest routines are not supported, residents routines are based on the location of their room and the day of the month.



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**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 related to ensuring that each resident of the home has his or her desired bedtime and rest routines supported and individualized to promote comfort, rest and sleep, to be implemented voluntarily.*

*1st LTH*

Issued on this ~~8th~~ day of September, 2011

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

A handwritten signature in black ink, appearing to be "E. Smith", written within a rectangular box.