Inspection Report under the *Long-Term Care Homes Act, 2007*

Rapport d'inspection prévue le *Loi de 2007 les foyers de soins de longue durée*

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

Ministère de la Santé et des Soins de longue durée
Division de la responsabilisation et de la performance du système de santé
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☐ **Licensee Copy/Copie du Titulaire** ☒ **Public Copy/Copie Public**

Date(s) of inspection/Date de l'inspection	**Inspection No/ d'inspection**	**Type of Inspection/Genre d'inspection**
February 10, 2011	2011-165-2720-10feb101946	Complaint H-00234

Licensee/Titulaire

Diversicare Canada Management Services Co., Inc.
2121 Argentia Road, suite 301
Mississauga, ON
L5N 2X4

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

Hardy Terrace Long Term Care Home
612 Mount Pleasant Road,
RR#2, Brantford, ON
N3T 5L5

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

Tammy Szymanowski

Inspection Summary/Sommaire d'inspection

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

During the course of the inspection, the inspector spoke with: the administrator, the director of care, registered staff, personal care workers and the resident.

During the course of the inspection, the inspector: reviewed the clinical health record, observed the lunch meal, and reviewed policies.

The following Inspection Protocols were used during this inspection: nutrition and hydration.

☒ Findings of Non-Compliance were found during this inspection. The following action was taken:

4 WN
2 VPC

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA. 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.)	Le suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée. Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with LTCHA, 2007, S.O. 2007 C.8, s.6(10)(b)
The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when, the resident's care needs change or care set out in the plan is no longer necessary.

Findings:

1. An identified resident had meal time behaviours during the lunch meal and staff confirmed that this is a normal behaviour for the resident however; the plan of care had not been revised to include the resident's behaviour during meals along with strategies to manage this behaviour and maximize nutritional intake. The plan of care did not include the identification of the resident's recent weight loss of 7.1% over the past two months and interventions to address the risk including the initiation of supplementation.

Inspector ID #:	165

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 the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when, the resident's care needs change or care set out in the plan is no longer necessary, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with LTCHA, 2007, S.O. 2007 C.8, s s6(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.

Findings:

1. An identified resident's plan of care indicates the home's dietitian and food service supervisor will monitor food and fluid intake sheets however; there are thirty-six omissions in the resident's nutrition and hydration flow sheet for the month of January.
2. An order written by the nurse practitioner for treatment of an identified resident was not processed until seven days after the order was written and the resident had still not received their first treatment at the time of the inspection. The Director of Care confirmed that the resident had not received a treatment at the time of the inspection.

Inspector ID #:	165

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 the care set out in the plan of care is provided to the resident as specified in the plan, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with O.Reg. 79/10, s.69(4)
Every licensee of a long-term care home shall ensure that residents with the following weight changes are assessed using an interdisciplinary approach, and that actions are taken and outcomes are evaluated: (4)Any other weight change that compromises the resident's health status.

Findings:

1. An identified resident's weight loss was assessed by the home's dietitian and a nutritional supplement was ordered at this time. The resident continued with poor oral intake at meals and has refused the supplement at least ten times over an eleven day period. The resident has lost another 1.3kg, 2.5% body weight for the month of February 2011 and there has been no evaluation of the actions taken and outcomes for this resident.

Inspector ID #:	165

WN #4: The Licensee has failed to comply with O.Reg. 79/10, s.103(1)
Every licensee of a long-term care home who receives a written complaint with respect to a matter that the licensee reports or reported to the Director under section 24 of the Act shall submit a copy of the complaint to the Director along with a written report documenting the response the licensee made to the complainant under subsection 101(1).

Findings:

1. The home received a complaint letter related to the behaviour of one of the staff of the home. The home did not submit a copy of the complaint to the Director along with a written report documenting the response the licensee made to the complainant. The Administrator confirms that he is unable to locate a response to the complainant.

Inspector ID #:	165

Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné	Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.
Title: Date:	Date of Report: (if different from date(s) of inspection). June 30/11