



**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 sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**

**Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée**

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## **Public Copy/Copie du public**

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<b>Report Date(s) / Date(s) du rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Sep 29, 2016	2016_520622_0003	020326-16, 024488-16, 026094-16	Complaint

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### **Licensee/Titulaire de permis**

THE CORPORATION OF THE COUNTY OF HASTINGS  
1M Manor Lane Box #758 BANCROFT ON K0L 1C0

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

HASTINGS MANOR HOME FOR THE AGED  
476 DUNDAS STREET WEST P.O. BOX 458 BELLEVILLE ON K8N 5B2

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

HEATH HEFFERNAN (622)

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## **Inspection Summary/Résumé de l'inspection**



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

**This inspection was conducted on the following date(s): September 19, 20, 26, 27, 2016.**

**The following inspection logs were completed as part of this inspection report;  
020326-16 - complaint related to resident care.  
024488-16 - complaint related to resident care.  
026094-16 - complaint related to resident care.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, a Registered Practical Nurse, Personal Support Workers and family.**

**The following Inspection Protocols were used during this inspection:  
Continence Care and Bowel Management  
Falls Prevention  
Hospitalization and Change in Condition  
Minimizing of Restraining  
Personal Support Services  
Skin and Wound Care**

**During the course of this inspection, Non-Compliances were issued.**

**1 WN(s)  
1 VPC(s)  
0 CO(s)  
0 DR(s)  
0 WAO(s)**

**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

<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>Legendé</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>

**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:**

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



**Findings/Faits saillants :**

1. The licensee has failed to ensure that there is a written plan of care for each resident that sets out clear directions to staff and others who provide direct care to the resident.

This finding is related to intake log# 020326-16

The complainant indicated during an interview with inspector #622 that resident #001's treatments were not always followed as ordered.

Review of the Physicians Orders on a specified date indicated the specific treatment was to be applied day and evening shift every day.

A review of the Treatment Administration Record (TAR) for two specified consecutive months indicated the treatment was not signed for by staff on five day shifts.

Interview with the Assistant Director of Care (ADOC) September 19, 2016 indicated the direction on the (TAR) and the Physician's Order had been completed incorrectly. The ADOC indicated that generally this specific treatment would not be used as directed on the TAR and Physician's order. The ADOC further indicated the direction would only be written on the TARs in this manner as a nursing measure for monitoring purposes. The ADOC outlined the expected regime for the specific treatment. The ADOC further confirmed clear direction was not provided to registered staff in the plan of care regarding the specific treatment for resident #001. [s. 6. (1) (c)]

***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 there is a written plan of care for each resident that sets out clear directions to staff and others who provide direct care to the resident, to be implemented voluntarily.***



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**Issued on this 30th day of September, 2016**

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

**Original report signed by the inspector.**