



Ministry of Health and Long-Term Care

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

Ministère de la Santé et des Soins de longue durée

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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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Nov 8, 13, 14, 2012 Oct. 9/12 ST	2012_105130_0037	Complaint

Licensee/Titulaire de permis

HENLEY HOUSE LIMITED
 200 RONSON DRIVE, SUITE 305, TORONTO, ON, M9W-5Z9

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

THE HENLEY HOUSE
 20 Ernest Street, St. Catharines, ON, L2N-7T2

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 Care, Associate Director of Care, Registered Staff, personal support workers and residents.

During the course of the inspection, the inspector(s) interviewed staff, residents, reviewed clinical records and observed residents related to H-001863-12.

The following Inspection Protocols were used during this inspection:

Skin and Wound Care

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

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

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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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.

Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

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 saillants :

1. The licensee did not ensure that care set out in the plan of care was provided to the resident as specified in the plan. Resident #1 was to have a treatment done daily in 2012, staff interviewed and documentation confirmed the treatment was not done on either day. Resident #2 was to have a treatment at bedtime; staff interviewed and documentation confirmed on an identified date in 2012 the treatment was not provided. Resident #3 was to have a specific treatment done twice daily; Staff interviewed and documentation confirmed that treatments were not provided on seven occasions in 2012.

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

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 8. Policies, etc., to be followed, and records
Specifically failed to comply with the following subsections:

s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,
(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and
(b) is complied with. O. Reg. 79/10, s. 8 (1).

Findings/Faits saillants :

1. The licensee did not ensure that any plan, policy, protocol, procedure, strategy or system instituted or otherwise put in place was complied with. According to the home's Policy and Procedure: s. 03-08 Wounds-Stasis Ulcers, Surgical and Other indicates: For residents with a stasis ulcer, surgical wound or other, Registered staff will (d) complete the wound care treatment as ordered. Policy and Procedure :s. 8-1 Documentation and Record Keeping/MAR and TAR General indicates: (10) Use the chart codes on the bottom right of the MAR sheet when a medication is not given Chart also in the progress notes for "Drug Refused". It was confirmed by staff that s. 8.1 (10) applies also to the Treatment Administrator Record (TAR). According to the TAR for resident #1, treatments were not completed on two identified dates in 2012. There was no documentation found in the progress notes indicating the resident had refused the treatment. According to the TARs for residents #2 and #3, treatments were not provided on three specified dates in 2012 and there was no documentation found in the progress notes to indicate whether or not the residents had refused treatments. This information was confirmed by staff.

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 any plan, policy, protocol, procedure, strategy or system instituted or other wise put in place is complied with, to be implemented voluntarily.

Issued on this 14th day of November, 2012

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

