

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

Rapport d'inspection prévue
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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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Nov 1, 2019	2019_532590_0027	019144-19	Complaint

Licensee/Titulaire de permis

S & R Nursing Homes Ltd.
265 North Front Street Suite 200 SARNIA ON N7T 7X1

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

Heron Terrace Long Term Care Community
11550 McNorton Street WINDSOR ON N8P 1T9

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

ALICIA MARLATT (590)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): October 22 - 24, 2019.

During the course of the inspection, the inspector(s) spoke with the Administrator, a Manager of Resident Care, a Resident Care Coordinator, a Registered Nurse Supervisor, two Registered Practical Nurses, three Personal Support Workers and one complainant.

During the course of the inspection, the inspector(s) reviewed one resident's clinical record, one Customer/Team Member Feedback Form, one Infoline report, meeting minutes, invoices and policies relevant to inspection topics.

During the course of the inspection, the inspector(s) observed staff and resident interactions, infection prevention and control practices, the posting of required information, recreational activities and the general maintenance and cleanliness of the home.

**The following Inspection Protocols were used during this inspection:
Hospitalization and Change in Condition
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>Légende</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 O.Reg 79/10, s. 50. Skin and wound care

Specifically failed to comply with the following:

- s. 50. (2) Every licensee of a long-term care home shall ensure that,**
- (b) a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds,**
- (i) receives a skin assessment by a member of the registered nursing staff, using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment,**
 - (ii) receives immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required,**
 - (iii) is assessed by a registered dietitian who is a member of the staff of the home, and any changes made to the resident's plan of care relating to nutrition and hydration are implemented, and**
 - (iv) is reassessed at least weekly by a member of the registered nursing staff, if clinically indicated; O. Reg. 79/10, s. 50 (2).**

Findings/Faits saillants :

1. The licensee had failed to ensure that the resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, had been reassessed at least weekly by a member of the registered nursing staff, if clinically indicated.

A complaint was received by the Ministry of Long-Term Care from an identified individual complainant who was concerned with the skin and wound care resident #001 received during a specific month in 2018. The complainant stated that the resident had a wound and required daily care and monitoring by the staff. They felt the staff were not monitoring the wound well.

Review of resident #001's progress notes in the identified month of concern, showed that the resident had a wound. The wound was chronic and unhealable, and the goal for treatment was to maintain the area's current condition and prevent any further breakdown. Further, the progress notes showed that the resident developed an infection in the wound and required treatment with antibiotics. The progress notes also showed that the resident complained of pain and was medicated for pain related to the wound at least once a day for 10 days, on top of their regularly scheduled analgesics. There were several progress notes which documented the deterioration of the wound's condition, such as redness to the area, warm and painful to touch and purulent drainage by the time antibiotics were started.

Upon review of the assessment section in Point Click Care (PCC) it showed that there were no completed assessments for the wound in the identified month of concern.

In an interview with Registered Practical Nurse (RPN) #104 they shared that wounds were assessed weekly by the registered staff. When asked if this also applied to wounds that did not have a goal of healing, but maintaining the area of impaired skin, the RPN answered that they would have to check the home's policy to be sure. They shared that they had heard of other nurses not doing weekly assessments on chronic or unhealable wounds as they were not required, due to the fact that the wound was a long standing issue that would not really change.

In an interview with the Manager of Resident Care (MRC) #108 and Registered Nurse (RN) Supervisor #107, they answered that there were no completed wound assessments for the wound in the identified month of concern. They shared that resident #001 had a chronic wound, that had a goal of not healing, but maintaining the area and preventing any further skin breakdown, and considering it was an established wound that the resident had been admitted with, that weekly wound assessments were not required. The RN Supervisor stated that legislation required weekly assessments to be completed, only if they were clinically indicated. When asked if the home's policy directs this practice, they shared that they would have to check.

The Inspector reviewed the home's policy titled 'Skin and Wound Program', policy code RCM 10-06-01 and last revised on March 4, 2019. The policy outlined the process to follow when a resident exhibited altered skin integrity. The policy defined altered skin integrity as potential or actual disruption of epidermal or dermal tissue and may include, but is not limited to, pressure injury, stasis ulcer, skin tear, bruise, rash/excoriation resulting in a break in skin, other wounds (lesion, surgical incisions, blisters). The policy did not address any difference in the care or treatment to be provided based on the acuity or complexity of the wound.

In an interview with Administrator #100 the inspector shared that there was a specific month of concern for the complainant, related to resident #001's wound care. The inspector shared that there were no wound assessments completed in the identified month of concern. The inspector shared that the resident complained of pain and was medicated for pain on an almost daily basis until antibiotics were started. The inspector shared that there were progress notes documenting the declining condition of the wound, from the resident's complaints of daily pain, observed redness to the ear and drainage on

the day antibiotics were started. The inspector reviewed the policy with the Administrator as well, noting no difference in the frequency of assessments for chronic versus acute wounds. When asked if this was a clinical indication for a wound assessment to be completed the Administrator agreed that wound assessments should have been completed.

The licensee had failed to ensure that resident #001 who exhibited altered skin integrity was reassessed at least weekly by a member of the registered nursing staff when clinically indicated. [s. 50. (2) (b) (iv)]

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 exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, been reassessed at least weekly by a member of the registered nursing staff, if clinically indicated, to be implemented voluntarily.

Issued on this 1st day of November, 2019

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

Original report signed by the inspector.