

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

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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	
Jul 12, Aug 16, 21, 2012	2012_149165_0004	Critical Incident	
Licensee/Titulaire de permis	***************************************		
IDLEWYLD MANOR 449 SANATORIUM ROAD, HAMILTON, ON, L9C-2A7 Long-Term Care Home/Foyer de soins de longue durée			
IDLEWYLD MANOR 449 SANATORIUM ROAD, HAMILTON, ON, L9C-2A7			
Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs			
TAMMY SZYMANOWSKI (165)			
Inspection Summary/Résumé de l'inspection			

The purpose of this inspection was to conduct a Critical Incident inspection.

During the course of the inspection, the inspector(s) spoke with the resident and nursing staff related to critical incident H-00631-12/H-000813-12.

During the course of the inspection, the inspector(s) reviewed clinical health record and critical incident.

The following Inspection Protocols were used during this inspection: Continence Care and Bowel Management

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON	I-RESPECT DES EXIGENCES
WN Written Notification VPC Voluntary Plan of Correction DR Director Referral CO Compliance Order	Legendé WN Avis écrit VPC Plan de redressement volontaire DR Aiguillage au directeur CO Ordre de conformité WAO Ordres : travaux et activités



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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 O.Reg 79/10, s. 51. Continence care and bowel management Specifically failed to comply with the following subsections:

s. 51. (2) Every licensee of a long-term care home shall ensure that,

- (a) each resident who is incontinent receives an assessment that includes identification of causal factors, patterns, type of incontinence and potential to restore function with specific interventions, and that where the condition or circumstances of the resident require, an assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for assessment of incontinence;
- (b) each resident who is incontinent has an individualized plan, as part of his or her plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented;
- (c) each resident who is unable to toilet independently some or all of the time receives assistance from staff to manage and maintain continence;
- (d) each resident who is incontinent and has been assessed as being potentially continent or continent some of the time receives the assistance and support from staff to become continent or continent some of the time:
- (e) continence care products are not used as an alternative to providing assistance to a person to toilet;
- (f) there are a range of continence care products available and accessible to residents and staff at all times, and in sufficient quantities for all required changes;
- (g) residents who require continence care products have sufficient changes to remain clean, dry and comfortable; and
- (h) residents are provided with a range of continence care products that.
- (i) are based on their individual assessed needs.
- (ii) properly fit the residents,
- (iii) promote resident comfort, ease of use, dignity and good skin integrity.
- (iv) promote continued independence wherever possible, and
- (v) are appropriate for the time of day, and for the individual resident's type of incontinence. O. Reg. 79/10, s. 51 (2).

Findings/Faits saillants:

1. s51(2)(c)The licensee of the long term care home did not ensure that each resident who was unable to toilet independently some or all of the time received assistance from staff to manage and maintain continence. Staff confirmed that resident #1 requested to be toileted however, the staff member did not provide assistance to toilet the resident. The resident was not assisted for at least one hour and thirty minutes. The resident's plan of care indicated that the resident required assistance for the physical process of toileting and required 2 person total assistance for the entire process. The resident confirmed that they were not always able to maintain continence if staff did not assist promptly.

Issued on this 21st day of August, 2012



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

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