Ontario

Ministry of Long-Term Care

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

Ministère des Soins de longue durée

Rapport d'inspection en vertu de la Loi de 2007 sur les foyers de soins de longue durée

Long-Term Care Operations Division
Long-Term Care Inspections Branch

Division des opérations relatives aux soins de longue durée
Inspection de soins de longue durée

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Public Copy/Copie du rapport public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Oct 27, 2020	2020_792659_0023	015844-20	Critical Incident System

Licensee/Titulaire de permis

Steeves & Rozema Enterprises Limited
265 North Front Street Suite 200 SARNIA ON N7T 7X1

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

Lanark Heights Long Term Care Centre
46 Lanark Crescent KITCHENER ON N2N 2Z8

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

JANETM EVANS (659)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): October 14 and 15, 2020.

The following intakes were included in this inspection: Log #015844-20\Critical Incident (CI) #2917-000008-20 and Log #019564-20 \CI: 2917-000013-20 related to resident to resident altercations.

During the course of the inspection, the inspector(s) spoke with the Executive Director (ED), Director of Resident Care (DRC), Registered Nurses (RN), Registered Practical Nurses (RPN), Behavioural Support Ontario (BSO - RPN and PSW), Personal Support Workers (PSW), Life Enrichment Aide and residents.

Observations were completed for general care and cleanliness of residents, staff to resident interactions and resident to resident interactions. A review of resident care plans, DOS charting, behavioural assessments and other relevant records was completed.

The following Inspection Protocols were used during this inspection:
Prevention of Abuse, Neglect and Retaliation
Responsive Behaviours

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	
Legend WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	Légende WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité 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. 19. Duty to protect

Specifically failed to comply with the following:

s. 19. (1) Every licensee of a long-term care home shall protect residents from abuse by anyone and shall ensure that residents are not neglected by the licensee or staff. 2007, c. 8, s. 19 (1).

Findings/Faits saillants :

1. The licensee has failed to ensure that resident #002 was free from abuse by resident

#001 and that resident #003 was free from abuse by resident #004.

A verbal and physical altercation occurred between resident #001 and resident #002. As a result of this incident, resident #002 was injured and complained of pain. Resident #001 sustained areas of redness, bruising and an abrasion.

There were prior verbal and/or physical altercations between these residents related to similar incidents, but none resulted in injury to the residents.

Resident #001 had a history of verbal and physical responsive behaviours. At the time of the incident, staff were to redirect the resident and use GPA approaches for responsive behaviours.

Resident #002 had responsive behaviours in response to a particular trigger. An assistive device was in place to address the trigger.

Despite the interventions in place to address the resident's behaviours, there was an altercation between resident #001 and #002 and resident #002 was harmed.

Sources: CI 2917-000008-20, Risk Management, DOS documentation for resident #001 and resident #002, care plan for resident #001 and #002. [s. 19. (1)]

2. The licensee has failed to ensure that resident #003 was free from abuse by anyone.

Resident #003 and #004 had a verbal altercation in the hall. Staff found the residents yelling at one another and holding on to resident #004’s assistive device. Resident #003 reported that resident #004 had been physically responsive and showed staff they had been injured.

Both resident #003 and #004 had a history of verbal and physical responsive behaviours. Interventions were in their plan of care to manage the responsive behaviours.

Despite the interventions in place to address their responsive behaviours, there was an altercation between resident #003 and #004 and resident #003 was harmed

Sources: CI: 2917-000013-20 dated Sept 25, 2020, BSO - DOS documentation for resident #003 and #004, Care plan for resident #003 and #004. [s. 19. (1)]

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 resident #002 is free from abuse by resident #001 and that resident #003 is free from abuse by resident #004, to be implemented voluntarily.

Issued on this 9th day of November, 2020

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

Original report signed by the inspector.