



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

Health System Accountability and
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Performance Improvement and
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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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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jun 18, 2013	2013_183135_0022	L-000356-13	Critical Incident System

Licensee/Titulaire de permis

DEVONSHIRE ERIN MILLS INC.
195 DUFFERIN AVENUE, SUITE 800, LONDON, ON, N6A-1K7

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

BONNIE MACDONALD (135)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): June 13, 2013.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, 2 Assistant Directors of Care, Registered Nurse, Registered Practical Nurse, 2 Personal Support Workers, Food Services Manager, Dietary Aide and 2 Residents.

During the course of the inspection, the inspector(s) reviewed the critical incident, related internal investigation, resident clinical records, policies and procedures for Abuse and Neglect and related staff training. Observations of residents were conducted in resident home areas.

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

Findings of Non-Compliance were found during this inspection.

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

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. 8. Policies, etc., to be followed, and records

Specifically failed to comply with the following:

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 O. Reg. 79/10, s. 8 (1).
(b) is complied with. O. Reg. 79/10, s. 8 (1).

Findings/Faits saillants :



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1. The home's Resident Abuse: Reporting and Investigating policy # LA02-0901, November 2011, was not complied with when, staff member last attended Prevention of Abuse and Neglect training.

The Resident Abuse: Reporting and Investigating policy # LA02-0901, November 2011, was reviewed. The policy states:

#3. Abuse education is a mandatory staff development component. Annually, all staff and volunteers will attend an in-service on the Abuse Policy and sign off of understanding and participation.

Assistant Director of Care confirmed the staff member had not attended two recent education sessions in 2013 and staff member's last in-service for Prevention of Abuse and Neglect in 2012.

During an interview the Administrator confirmed, her expectation that the home's Resident Abuse: Reporting and Investigating policy # LA02-0901, is complied with and staff annually attend an in-service for Prevention of Abuse and Neglect. [s. 8. (1) (b)]

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 ensuring staff annually attend an in-service for Prevention of Abuse and Neglect, to be implemented voluntarily.



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Issued on this 18th day of June, 2013

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

Bonnie MacDonald