



**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
Performance Division
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
Oct 22, 2013	2013_181105_0053	L-000785-13	Complaint

Licensee/Titulaire de permis

GROSVENOR HEALTH CARE PARTNERSHIP (NO. 3)
150 WATER STREET SOUTH, CAMBRIDGE, ON, N1R-3E2

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

MAITLAND MANOR
290 SOUTH STREET, GODERICH, ON, N7A-4G6

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

JUNE OSBORN (105)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): October 15, 2013

During the course of the inspection, the inspector(s) spoke with 5 Residents, the Administrative Assistant, 5 Personal Support Workers, 1 Dietary Aide, 2 Recreation Aides, 1 Housekeeping Aide, 2 Registered Practical Nurses, 2 Registered Nurses, the Acting Director of Care, and the Administrator.

During the course of the inspection, the inspector(s) observed 2 meals with a medication pass, reviewed policies and procedures, reviewed staffing plans, observed staff interactions with residents, and reviewed other pertinent documents.

- The following Inspection Protocols were used during this inspection:
- Dining Observation
 - Medication
 - Sufficient Staffing

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.)

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.

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

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 :

1. The licensee has failed to ensure that policy "3-7 The medication Pass" has been complied with.

According to the Acting Director of Care, Procedure # 7 Administer medications, is intended to ensure that the registered staff member witness the resident take the medication that is being administered.

During the dining observation at a breakfast meal, it was noted that medications were left on tables in front of several residents and no oversight of the resident taking the medications. This was verified by the Administrator [s. 8. (1)]



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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 staff comply with the Medication Pass policy., to be implemented voluntarily.

Issued on this 22nd day of October, 2013

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

JUNE OSBORN