

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

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Original Public Report	
Report Issue Date: June 21, 2024	
Inspection Number: 2024-1497-0004	
Inspection Type: Complaint Critical Incident	
Licensee: Maxville Manor	
Long Term Care Home and City: Maxville Manor, Maxville	
Lead Inspector Linda Harkins (126)	Inspector Digital Signature
Additional Inspector(s) Dee Colborne (000721)	

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): June 18, 19, 20, 21, 2024.

The following intake(s) were inspected:

- Intake: #00114961 - Critical Incident (CI) #3000-000021-24 - related to the fall of a resident
- Intake: #00116472 - Complaint related to resident's care
- Intake: #00117693 - CI #000028-24- related to outbreak

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The following Inspection Protocols were used during this inspection:

- Skin and Wound Prevention and Management
- Continence Care
- Food, Nutrition and Hydration
- Infection Prevention and Control
- Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of care

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 6 (10) (b)

Plan of care

s. 6 (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,
(b) the resident's care needs change or care set out in the plan is no longer necessary; or

The licensee has failed to ensure that resident #001's care needs changes were assessed related to continence and skin management and were not communicated to the Nurse Practitioner and Physician.

Sources: Interviews with Registered Nurse (RN) #101 and Nurse Practitioner #102, the resident health care record and the Doctor's book.

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WRITTEN NOTIFICATION: Skin and wound care

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (i)

Skin and wound care

s. 55 (2) Every licensee of a long-term care home shall ensure that,

(b) a resident exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds,

(i) receives a skin assessment by an authorized person described in subsection (2.1), using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment,

The licensee has failed to ensure that resident #001 received a skin assessment using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment. Resident #001 exhibited skin impairment and the assessment was not documented using the clinically appropriate assessment tool.

Sources: Interviews with RN #101 and Director of Care #100 and record reviews.
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Inspection Report Under the
Fixing Long-Term Care Act, 2021

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