



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

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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
Nov 7, 2013	2013_214146_0060	H-000713-13	Critical Incident System

Licensee/Titulaire de permis

THE REGIONAL MUNICIPALITY OF NIAGARA
2201 ST. DAVID'S ROAD, THOROLD, ON, L2V-4T7

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

THE MEADOWS OF DORCHESTER
6623 Kalar Road, NIAGARA FALLS, ON, L2H-2T3

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

BARBARA NAYKALYK-HUNT (146)

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): November 6, 2013.

During the course of the inspection, the inspector(s) spoke with the administrator, Director of Care (DOC), Assistant Director of Care (ADOC), registered staff, Personal Support Workers (PSW's) and residents.

During the course of the inspection, the inspector(s) observed a resident's room and transfer device, reviewed resident health records, policy and procedures related to lifts, transfers and continence care, manufacturer's instructions related to a mechanical lift and the home's internal investigation notes.

The following Inspection Protocols were used during this inspection: Personal Support Services

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 :



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1. The licensee of the home did not ensure that any plan, policy, protocol, procedure, strategy or system instituted or otherwise put in place was complied with. The home's lift and transfer policy #RKM00-11 indicated that the role of employees included reporting immediately to the supervisor any change in resident mobility status and any near misses. In October 2013, while transferring a resident, a PSW observed that the resident suddenly became weak and unsteady. The PSW later shared with a peer that it had been a near miss with the resident. The employee did not report the change in resident mobility status nor the near miss to the supervisor immediately as per policy.

This information was confirmed by two PSW's, the nurse supervisor and the administrator. [s. 8. (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 any plan, policy, protocol, procedure, strategy or system instituted or otherwise put in place is complied with, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 23. Every licensee of a long-term care home shall ensure that staff use all equipment, supplies, devices, assistive aids and positioning aids in the home in accordance with manufacturers' instructions. O. Reg. 79/10, s. 23.

Findings/Faits saillants :



1. The licensee did not ensure that staff used all equipment in accordance with manufacturers' instructions.

The manufacturer's instructions for the sara 3000 Arjo mechanical lift indicated, on page 12, that the lift may be used on residents with a specific disability, but a caution is added that indicated to only use "this or other methods after a satisfactory professional assessment has been carried out on the individual" resident. In October 2013, resident #001, who had the specific disability, was lifted with the sit to stand Sara mechanical lift by two PSW's without consultation of the nurse. There was no professional assessment carried out on the individual resident before using the lift as per the manufacturers instructions.

This information was confirmed by the PSW's, the health record and the administrator.
[s. 23.]

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 staff use all equipment, supplies, devices, assistive aids and positioning aids in the home in accordance with manufacturers' instructions, to be implemented voluntarily.

Issued on this 14th day of November, 2013

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

BARBARA NAWKAL - Hurd