



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 prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division
 Performance Improvement and Compliance Branch
 Division de la responsabilisation et de la performance du système de santé
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jul 19, Sep 27, 28, 2012	2012_105130_0019	Complaint

Licensee/Titulaire de permis

NIAGARA HEALTH SYSTEM
 63 THIRD STREET, WELLAND HOSPITAL SITE, WELLAND, ON, L3B-4W6

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

NIAGARA HEALTH SYSTEM, WELLAND HOSPITAL SITE, EXTENDED CARE UNIT
 155 Ontario Street, St. Catharines, ON, L2R-5K3

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

GILLIAN HUNTER (130)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with The Administrator, Director of Care, Registered Staff, personal support workers and residents.

During the course of the inspection, the inspector(s) interviewed staff, residents and reviewed clinical records related to H-001382-12/H-002507-11.

The following Inspection Protocols were used during this inspection:

Nutrition and Hydration

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



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<p>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.)</p>	<p>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.</p>
<p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

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 subsections:

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

Findings/Faits saillants :

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. According to the Food Services Manager, the Registered Dietitian (RD) and the home's " Dietary Referral and Communication Form", a request for a nutrition assessment should be initiated when "poor fluid intake (less than 1000ml/day)" is noted. In 2012 the "meal flow sheet" for Resident #2 indicated consumption of less than 1000ml/day on at least 5 occasions and the "meal flow sheet" for Resident #3 indicated consumption of less than 1000ml/day on at least 7 occasions, over the same time period. Staff verified referrals were not made to the RD as per policy.

The home's admission protocol indicated a "urinalysis R&M" for new admissions. Resident #4 was admitted to the home in 2011, Staff confirmed a urine specimen was not obtained and urinalysis was not completed as per the protocol. (Please note: This evidence of non-compliance was found during Inspection #2012_105130_0020.

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 was complied with, to be implemented voluntarily.

Issued on this 28th day of September, 2012



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

A handwritten signature in cursive script, appearing to read "Suacey", written in black ink on a white background.