



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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Table with 3 columns: Date(s) of Inspection, Inspection No, Type of Inspection. Row 1: Aug 16, 17, 18, 23, 2011; 2011_105130_0002; Complaint

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

NORTHLAND POINTE
2 Fielden Avenue, PORT COLBORNE, ON, L3K-6G4

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, the Director of Care, registered staff, personal support workers and the resident.

During the course of the inspection, the inspector(s) Reviewed the identified residents record, observed the resident and observed his room and his furnishings.

The following Inspection Protocols were used in part or in whole during this inspection:

Continence Care and Bowel Management

Pain

Recreation and Social Activities

Skin and Wound Care

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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<p>Definitions</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Définitions</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<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>La 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 LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care
Specifically failed to comply with the following subsections:

s. 6. (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan. 2007, c. 8, s. 6 (7).

Findings/Faits saignants :

1. The care set out in the plan of care is not provided to the resident as specified in the plan. On August 16, 2011 at 1300hrs the identified resident stated he had constant discomfort because of sitting in his wheelchair. The resident was observed on August 16, 2011 from 1030hrs to 1315hrs, during which time he was not repositioned after two hours as indicated in his plan of care. The physician has ordered as needed analgesic for pain. The medication administration record for July and August was reviewed and indicates that no "as needed" medication has been administered during this time period.
2. The identified resident's plan of care related to skin and wound care indicates that he is on a turning and repositioning schedule. According to the plan he will be turned and repositioned every two hours. On August 16, 2011, the resident was observed from 1030hrs until 1315hrs, during which time the resident was not repositioned. The resident was interviewed and stated he was in his wheelchair from approximately 0800hrs and was not repositioned. Staff interviewed state the resident was transferred to his chair at approximately 0900hrs. s.6. (7)
3. The plan or care indicates that the resident requires total assistance from two staff for the entire process of toileting. It also states he will be toileted routinely - ac and/or pc meals, hs and prn (before and after meals at night and as needed). On August 16, 2011, the resident was observed from 1030hrs to 1315hrs, during which time he was not toileted. The resident was transferred from his wheelchair to his bed at 1315hrs. The resident stated he had not received assistance with toileting since getting out of bed. s. 6. (7)

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 in ensuring that care set out in the plan of care is provided to the resident, as specified in the plan, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 51. Continence care and bowel management



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Specifically failed to comply with the following subsections:

- s. 51. (2) Every licensee of a long-term care home shall ensure that,
- (a) each resident who is incontinent receives an assessment that includes identification of causal factors, patterns, type of incontinence and potential to restore function with specific interventions, and that where the condition or circumstances of the resident require, an assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for assessment of incontinence;
 - (b) each resident who is incontinent has an individualized plan, as part of his or her plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented;
 - (c) each resident who is unable to toilet independently some or all of the time receives assistance from staff to manage and maintain continence;
 - (d) each resident who is incontinent and has been assessed as being potentially continent or continent some of the time receives the assistance and support from staff to become continent or continent some of the time;
 - (e) continence care products are not used as an alternative to providing assistance to a person to toilet;
 - (f) there are a range of continence care products available and accessible to residents and staff at all times, and in sufficient quantities for all required changes;
 - (g) residents who require continence care products have sufficient changes to remain clean, dry and comfortable; and
 - (h) residents are provided with a range of continence care products that,
 - (i) are based on their individual assessed needs,
 - (ii) properly fit the residents,
 - (iii) promote resident comfort, ease of use, dignity and good skin integrity,
 - (iv) promote continued independence wherever possible, and
 - (v) are appropriate for the time of day, and for the individual resident's type of incontinence. O. Reg. 79/10, s. 51 (2).

Findings/Faits saignants :

1. An identified resident did not have sufficient changes of his continence care product to remain clean, dry and comfortable. The resident was observed on August 16, 2011 from 1030 hours until 1300 hours, during which time the resident was not toileted and/or checked for containment. At least one registered staff interviewed, states the resident was up in his wheelchair from approximately 0930 hrs. The resident's plan of care indicates the resident will be repositioned every 2 hours and will be toileted before and after meals, at bedtime and as needed. It was observed that the resident was not toileted before or after the noon meal on August 16, 2011. The Administrator confirmed that on [redacted] 2011, at 1415 she met with the resident and his Power of Attorney and verified that the resident's pants were wet from urine and that he had not been toileted and or changed in accordance with the resident's plan of care. r.51.(2)(g)

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 residents who require continence care products have sufficient changes to remain clean, dry and comfortable, to be implemented voluntarily.

Issued on this 25th day of August, 2011



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

A large, stylized handwritten signature in black ink, centered within a rectangular box. The signature appears to be "L. Vink".

Revised for the purpose of publication
Signed by L. Vink, LTC Homes Inspector
December 9, 2011

A small, handwritten signature in black ink, located below the printed text. It appears to be "L. Vink".