



Ministry of Health and Long-Term Care

Inspection Report under the Long-Term Care Homes Act, 2007

Ministère de la Santé et des Soins de longue durée

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: Jun 21, 22, 27, 2011; 2011_063165_0004; Complaint

Licensee/Titulaire de permis

PARK LANE TERRACE LIMITED
284 CENTRAL AVENUE, LONDON, ON, N6B-2C8

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

PARK LANE TERRACE
295 GRAND RIVER STREET NORTH, PARIS, ON, N3L-2N9

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

TAMMY SZYMANOWSKI (165)

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 director of care, the administrator, the registered dietitian, residents, dietary staff and nursing staff.

During the course of the inspection, the inspector(s) review of clinical health records, review of policy and procedures and observation of lunch.

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

Nutrition and Hydration

Responsive Behaviours

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Table with 2 columns: Definitions, Définitions. Row 1: WN - Written Notification, Avis écrit; VPC - Voluntary Plan of Correction, Plan de redressement volontaire; DR - Director Referral, Aiguillage au directeur; CO - Compliance Order, Ordre de conformité; WAO - Work and Activity Order, 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.)

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

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 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 sayants :

1. The home did not ensure that the bowel protocol was complied with for an identified resident. The bowel protocol indicates that on day 2 with no bowel movement that a laxative is provided in the evening. Day 3 with no bowel movement indicates the home will provide additional dietary support with breakfast and repeat a laxative in the evening. If no bowel movement by day four morning than one glycerin suppository and one dulcolax suppository or one fleet enema is provided. If the resident has not had a bowel movement by day four then the physician is to be called for further interventions. An identified resident did not have a bowel movement for six days. Medication administration records (MAR) indicate the resident refused their regular ordered bowel medications on the second and fifth day however, the resident did accept bowel medication as required per the bowel protocol on the fifth day. The MAR, bowel movement tool and the progress notes indicate that there was no interventions offered to the resident on day two, three and four and the home did not notify the physician on the fourth day as indicated in the homes bowel protocol. The resident did not have a bowel movement for seven days. The resident's MAR indicates that the resident was taking their regular ordered bowel medications with the exception of one dose on the sixth day. The MAR, bowel movement tool and the progress notes indicate that there was no interventions offered on day two, day three, day four and day five and the home did not notify the physician on the fourth day as indicated in the homes bowel protocol. The progress notes confirm that the resident was in rectal discomfort and the resident was disimpacted with a medium amount of dry hard stool on the seventh day.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 69. Weight changes Every licensee of a long-term care home shall ensure that residents with the following weight changes are assessed using an interdisciplinary approach, and that actions are taken and outcomes are evaluated:

- 1. A change of 5 per cent of body weight, or more, over one month.**
- 2. A change of 7.5 per cent of body weight, or more, over three months.**
- 3. A change of 10 per cent of body weight, or more, over 6 months.**
- 4. Any other weight change that compromises the resident's health status. O. Reg. 79/10, s. 69.**

Findings/Faits sayants :

1. An identified resident was receiving a nutritional supplement at lunch and supper which was indicated in the resident's plan of care. The resident experienced a 5kg weight loss in one month and their weight fell below their goal weight range. The resident continued with another 6.9kg weight loss which triggered a significant body weight loss of 9.2% in one month. There was no evaluation of the effectiveness of the supplement for the resident completed by the dietitian and the dietitian confirmed that the home does not monitor supplement consumption for the resident and therefore, the dietitian is unable to evaluate the outcomes. There was no June weight taken and recorded on the weight sheet tool or point click care as of June 21, 2011 and the weight sheet tool indicated that the resident's weight still needed to be taken.



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Rapport d'inspection
prévus le Loi de 2007 les
foyers de soins de longue

Issued on this 10th day of August, 2011

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

A handwritten signature in black ink, appearing to read "Ajaymancu" or similar, written in a cursive style.