

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 Performance Improvement and Compliance Branch 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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Date(s) of inspection/Date(s) de Inspection No/ No de l'inspection Type of Inspection/Genre l'inspection d'inspection Oct 17, 19, 22, 2012 2012\_198117\_0002 Other Licensee/Titulaire de permis

CHARTWELL MASTER CARE LP

100 Milverton Drive, Suite 700, MISSISSAUGA, ON, L5R-4H1

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

RESIDENCE CHAMPLAIN

428 Front Road West, L'Orignal, ON, K0B-1K0

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

LYNE DUCHESNE (117)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct an Other inspection.

During the course of the inspection, the inspector(s) spoke with the home's Administrator, Director of Care, Administrative Assistant, Food Service Supervisor, several Registered Nurses (RN), several Registered Practical Nurses, several Personal Support Workers, to an activity aid, to a restorative care aid, and to several residents including the President of the Resident Council.

During the course of the inspection, the inspector(s) reviewed several residents health care records; observed resident care and services; observed lunch time meal service of October 17, 2012; toured the home and resident rooms; reviewed Resident Council and Family Council meeting minutes; reviewed the home's policy on Abuse #LTCE-RCA-E-002, revised March 2012; and reviewed the home's Nursing Staffing Schedule from July 22 to October 13, 2012.

The following Inspection Protocols were used during this inspection:

Admission Process

**Dining Observation** 

Residents' Council

Responsive Behaviours



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## **Sufficient Staffing**

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES	
Legend	Legendé
VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
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)	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 LTCHA, 2007 S.O. 2007, c.8, s. 8. Nursing and personal support services

Specifically failed to comply with the following subsections:

s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

Findings/Faits saillants:



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1. The licensee failed to comply with the LTCHA 2007, s. 8 (3) as it relates that there was no registered nurse, who is both an employee of the licensee and a member of the regular nursing staff of the home, on duty and present in at the home at all times.

A review of the home's registered staff work schedule from July 22, 2012 to October 13, 2012 was done. There was no registered nurse on duty and present in the home for the following shifts:

July 22-24-25-26-27 no RN on evening shift July 28-29 no RN on night shift

August 1-4-10-16-18 19-20-30-31 no RN on evening shift Aug 24-25-26-27 no RN on night shift

Sept 2- 5- 7-10-13-14-15-16-27-29-30 no RN on evening shift Sept 10-13- no RN on night shift

Oct 5-7-11-13 no RN on evening shift Oct 8 no RN on night shift

The home's Administrator and Director of Care stated that since July 2012, the home has had a vacant 0.6 part time evening registered nurse position. The staffing schedule indicates that there were two Registered Practical Nurses working on site, at the home, with a Registered Nurse available by telephone, for the shifts when no Registered Nurse was on site for the above dates. This was confirmed by the Administrator, Director of Care and Administrative Assistant.

It is noted that the home has been actively recruiting for the vacant position, with no success at this time.

## 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 at least one registered nurse, who is both an employee of the licensee and a member of the regular nursing staff of the home, is on duty and present in the home, at all times, except as provided for in the regulations, to be implemented voluntarily.

Issued on this 22nd day of October, 2012

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

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