



**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 sous la
Loi de 2007 sur les foyers de
soins de longue durée**

**Long-Term Care Homes Division
Long-Term Care Inspections Branch**

**Division des foyers de soins de
longue durée
Inspection de soins de longue durée**

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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
Jun 16, 2017	2017_630589_0009	017519-16, 020418-16, 021099-16	Complaint

Licensee/Titulaire de permis

PROVIDENCE HEALTHCARE
3276 St. Clair Avenue East TORONTO ON M1L 1W1

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

PROVIDENCE HEALTHCARE
3276 ST. CLAIR AVENUE EAST SCARBOROUGH ON M1L 1W1

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

JOANNE ZAHUR (589)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): May 25, 26, 30 and 31, 2017.

During the course of the inspection, the inspector(s) spoke with Director of Care (DOC), Registered Nurses (RN), Registered Practical Nurses (RPN), Resident Assistants (RA), Resident and Substitute Decision Maker (SDM).

During the course of the inspection, the inspector(s) observed staff and resident interactions and the provision of care, reviewed health records, complaint record logs, staff training records, staff personnel records and relevant policies and procedures.

The following Inspection Protocols were used during this inspection:

**Contenance Care and Bowel Management
Falls Prevention
Responsive Behaviours
Skin and Wound Care
Sufficient Staffing**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</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>The following constitutes written notification of non-compliance under paragraph 1 of section 152 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>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. 49. Falls prevention and management

Specifically failed to comply with the following:

s. 49. (2) Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that where the condition or circumstances of the resident require, a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls. O. Reg. 79/10, s. 49 (2).

Findings/Faits saillants :



1. The licensee has failed to ensure that when a resident has fallen, has the resident been assessed and, if required a post-fall assessment been conducted using a clinically appropriate assessment instrument that is specifically designed for falls.

Two complaints were submitted to the Ministry of Health and Long Term Care (MOHLTC) related to falls prevention for resident #026. The complainant revealed that in spite of fall prevention interventions in place resident #026 has continued to experience falls. Complainant further revealed that since a previous fall incident in which resident #026 sustained an injury, he/she was now dependent on staff for transferring.

Review of the Providence Healthcare's policy titled: Fall Prevention and Management, policy number HP 45, last revised on September 2016, revealed on page three that registered staff are to complete a post-fall assessment in PCC to determine the cause of the fall and make changes in the care plan to prevent recurrence and add/modify the falling star risk action card as indicated.

Observations conducted by the inspector revealed an identifying action card attached to resident #026's wheelchair indicating he/she was at risk for falls.

Review of resident #026's documentation notes revealed four falls incidents had occurred over the past year. Review of post falls assessments in point click care (PCC) under the assessments tab revealed that a post-fall assessment had not been completed for one of these falls incidents.

In an interview, registered nurse (RN) #197 stated post-fall assessments are to be conducted after each fall incident in PCC under the assessments tab. RN #197 further stated he/she had been scheduled to work and must have missed completing a post-fall assessment that shift for resident #026.

In an interview, DRC #161 stated that it is the home's expectation that post-fall assessments be conducted after each and every fall and acknowledged that RN #197 had not conducted a post-fall assessment using a clinically appropriate assessment instrument. [s. 49. (2)]



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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 when a resident has fallen, has the resident been assessed and, if required a post-fall assessment been conducted using a clinically appropriate assessment instrument that is specifically designed for falls, to be implemented voluntarily.

Issued on this 16th day of June, 2017

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

Original report signed by the inspector.