



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

**Rapport d'inspection
prevue le *Loi de 2007
les foyers de soins de
longue durée***

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

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**Ministère de la Santé et des Soins de
longue durée**

Division de la responsabilisation et de la performance du
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Date(s) of inspection/Date de l'inspection August 18, 2010	Inspection No/ d'inspection 2010-187-2760- 17Aug171908	Type of Inspection/Genre d'inspection Complaint Inspection L-00552
Licensee/Titulaire Meritas Care Corporation, 567 Victoria Ave. Windsor Ontario N9A 4N1		
Long-Term Care Home/Foyer de soins de longue durée Regency Park Long Term Care Home, 567 Victoria Ave. Windsor Ontario N9A 4N1		
Name of Inspector(s)/Nom de l'inspecteur(s) Brenda Gauld (#187)		

Inspection Summary/Sommaire d'inspection

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

During the course of the inspection, the inspector spoke with the administrator, acting Director of Care, RPN, HCAs and housekeeper.

During the course of the inspection, the inspector reviewed a chart, flow sheets, internal processes for reporting and the home's abuse policy.

Findings of Non-Compliance were found during this inspection. The following action was taken:

- 3 WN
- 3 VPC



NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

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

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.)

Le suivant constituer un avis d'écrit de l'exigences prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with O. Reg. 79/10, s.8(1)(b)

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

(b) is complied with

Findings:

The home's abuse policy was not followed after a recent incident between 2 residents.

Inspector ID #: 187

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 following their abuse policy, to be implemented voluntarily.



WN #2: The Licensee has failed to comply with O. Reg. 79/10, s.98
Every licensee of a long-term care home shall ensure that the appropriate police force is immediately notified of any alleged, suspected or witnessed incident of abuse or neglect of a resident that the licensee suspects may constitute a criminal offence.

Findings:

The home did not call the police after a recent incident of resident abuse.

Inspector ID #: 187

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 contacting the police, to be implemented voluntarily.

WN #3: The Licensee has failed to comply with O. Reg. 79/10, s.53(1)(3)

Every licensee of a long-term care home shall ensure that the following are developed to meet the needs of residents with responsive behaviours:

3. Resident monitoring and internal reporting protocols

Findings:

1. There is no documentation on a resident's chart of inappropriate behaviours between December 2009 and July 10, 2010.
2. 3 different staff members reported that behaviours had occurred during this time period.

Inspector ID #: 187

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 with internal reporting protocols, to be implemented voluntarily.



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Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné	Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.
	<i>Brenda Sauld</i> <i>Aug 25, 2010</i>
Title:	Date of Report (if different from date(s) of inspection).