



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

Health System Accountability and Performance Division
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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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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jan 28, 2014	2014_241502_0002	T-527-13	Complaint

Licensee/Titulaire de permis

ATK CARE INC.
1386 INDIAN GROVE, MISSISSAUGA, ON, L5H-2S6

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

RIVER GLEN HAVEN NURSING HOME
160 High Street, P.O. Box 368, Sutton West, ON, L0E-1R0

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

JULIENNE NGONLOGA (502) DIANE BROWN (110)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): January 21, 2014.

During the course of the inspection, the inspector(s) spoke with Administrator, Food Service Manager (FSM), food service staff.

During the course of the inspection, the inspector(s) reviewed food service staff schedule, staff training records, and related policy.

The following Inspection Protocols were used during this inspection:

Training and Orientation

Findings of Non-Compliance were found during this inspection.



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 LTCHA, 2007 S.O. 2007, c.8, s. 76. Training



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Specifically failed to comply with the following:

s. 76. (2) Every licensee shall ensure that no person mentioned in subsection (1) performs their responsibilities before receiving training in the areas mentioned below:

- 1. The Residents' Bill of Rights. 2007, c. 8, s. 76. (2).**
 - 2. The long-term care home's mission statement. 2007, c. 8, s. 76. (2).**
 - 3. The long-term care home's policy to promote zero tolerance of abuse and neglect of residents. 2007, c. 8, s. 76. (2).**
 - 4. The duty under section 24 to make mandatory reports. 2007, c. 8, s. 76. (2).**
 - 5. The protections afforded by section 26. 2007, c. 8, s. 76. (2).**
 - 6. The long-term care home's policy to minimize the restraining of residents. 2007, c. 8, s. 76. (2).**
 - 7. Fire prevention and safety. 2007, c. 8, s. 76. (2).**
 - 8. Emergency and evacuation procedures. 2007, c. 8, s. 76. (2).**
 - 9. Infection prevention and control. 2007, c. 8, s. 76. (2).**
 - 10. All Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee, that are relevant to the person's responsibilities. 2007, c. 8, s. 76. (2).**
 - 11. Any other areas provided for in the regulations. 2007, c. 8, s. 76. (2).**
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Findings/Faits saillants :



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1. The licensee failed to ensure that no person performs their responsibilities before receiving training in all Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee, that are relevant to the person's responsibilities.

Record review, food service manager and administrator interviews confirmed that dietary staff are required to complete an orientation checklist as part of the home's policy "Specific Orientation Dietary" B-25-10 dated July 5, 2012, prior to performing their job responsibilities. Interviews revealed that each staff also shadows and trains with a senior staff member for 2-3 days for each position within the dietary department prior to working the job position.

An identified staff member was hired on an identified date, in the dietary department to work in a position involving cleaning dishes and stocking serveries for next day breakfast. The staff member worked a dietary aide shift on an identified date, which involved serving residents dinner. The staff performed his/her responsibilities related to this shift before receiving the appropriate orientation as per home's policy. On January 21, 2014, the home has not provided the identified staff member with the appropriate orientation as per home's policy. [s. 76. (2)]

Issued on this 29th day of January, 2014

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

A handwritten signature in black ink that reads "J. Nlogu". The signature is written in a cursive, flowing style.