

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 fovers 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 Direction de l'amélioration de la performance et de la conformité

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Inspection No/ No de l'inspection Type of Inspection/Genre d'inspection Date(s) of inspection/Date(s) de l'inspection Complaint 2011_077109_0013 Aug 16, 23, 24, 2011 Licensee/Titulaire de permis

REVERA LONG TERM CARE INC. 55 STANDISH COURT, 8TH FLOOR, MISSISSAUGA, ON, L5R-4B2

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

SARA VISTA

27 SIMCOE STREET, ELMVALE, ON, L0L-1P0

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

SUSAN SQUIRES (109)

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 Executive Director, Maintenance-Manager, Registered Nursing staff, PSW staff.

During the course of the inspection, the inspector(s) Conducted a walk through of the home including the kitchen area, reviewed health record.

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

Accommodation Services - Maintenance

Personal Support Services

Skin and Wound Care

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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Definitions	Définitions					
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – 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	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.					
of "requirement under this Act" in subsection 2(1) of the LTCHA.)						

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 90. Maintenance services Specifically failed to comply with the following subsections:

- s. 90. (1) As part of the organized program of maintenance services under clause 15 (1) (c) of the Act, every licensee of a long-term care home shall ensure that,
- (a) maintenance services in the home are available seven days per week to ensure that the building, including both interior and exterior areas, and its operational systems are maintained in good repair; and
- (b) there are schedules and procedures in place for routine, preventive and remedial maintenance. O. Reg. 79/10, s. 90 (1).

Findings/Faits sayants:

1. Observed paint to be chipped and peeling in the kitchen above the refrigerators. There is no schedule in place for painting the kitchen.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 50. Skin and wound care Specifically failed to comply with the following subsections:

- s. 50. (2) Every licensee of a long-term care home shall ensure that,
- (a) a resident at risk of altered skin integrity receives a skin assessment by a member of the registered nursing staff,
- (i) within 24 hours of the resident's admission,
- (ii) upon any return of the resident from hospital, and
- (iii) upon any return of the resident from an absence of greater than 24 hours;
- (b) a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds,
- (i) receives a skin assessment by a member of the registered nursing staff, using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment,
- (ii) receives immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required,
- (iii) is assessed by a registered dietitian who is a member of the staff of the home, and any changes made to the resident's plan of care relating to nutrition and hydration are implemented, and
- (iv) is reassessed at least weekly by a member of the registered nursing staff, if clinically indicated;
- (c) the equipment, supplies, devices and positioning aids referred to in subsection (1) are readily available at the home as required to relieve pressure, treat pressure ulcers, skin tears or wounds and promote healing; and
- (d) any resident who is dependent on staff for repositioning is repositioned every two hours or more frequently as required depending upon the resident's condition and tolerance of tissue load, except that a resident shall only be repositioned while asleep if clinically indicated. O. Reg. 79/10, s. 50 (2).

Findings/Faits sayants :



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1. A resident with an identified skin condition did not receive a skin assessment by a member of the registered staff upon admission to the home.

Issued on this 29th day of August, 2011

Signature of Inspecto	or(s)/Sign	ature d	e l'inspe	ecteur o	u des ir	nspecte	urs		
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