

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

**Rapport d'inspection en vertu de
la Loi de 2007 sur les foyers de
soins de longue durée**

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

**Division des opérations relatives aux
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 # / No de registre	Type of Inspection / Genre d'inspection
Dec 8, 2021	2021_730593_0004	013753-21, 017579-21	Complaint

Licensee/Titulaire de permis

The Royale Development GP Corporation as general partner of The Royale
Development LP
302 Town Centre Blvd. Suite 300 Markham ON L3R 0E8

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

Granite Ridge Care Community
5501 Abbott Street East Stittsville ON K2S 2C5

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

GILLIAN CHAMBERLIN (593)

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): October 26 - 29, November 1 - 4, 8, 9, 15, 2021.

Complaint log #013753-21` was inspected related to the provision of care and services, specifically bathing.

Complaint log #017579-21` was inspected related to a change in condition and hospitalization of a resident.

During the course of the inspection, the inspector(s) spoke with the Administrator, Assistant Director of Care (ADOC), Registered Nursing Staff, Personal Support Workers (PSW) and residents.

The inspector observed the provision of care and services to residents, staff to resident interactions, resident to resident interactions, residents' environment and reviewed resident health care records.

The following Inspection Protocols were used during this inspection:

**Dignity, Choice and Privacy
Hospitalization and Change in Condition
Personal Support Services
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>Légende</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. 33. Bathing
Specifically failed to comply with the following:

s. 33. (1) Every licensee of a long-term care home shall ensure that each resident of the home is bathed, at a minimum, twice a week by the method of his or her choice and more frequently as determined by the resident's hygiene requirements, unless contraindicated by a medical condition. O. Reg. 79/10, s. 33 (1).

Findings/Faits saillants :

1. The licensee has failed to ensure that each resident of the home is bathed, at minimum, twice a week by the method of his or her choice and more frequently as determined by the residents hygiene requirements, unless contraindicated by a medical condition.

Resident #005's plan of care was reviewed, and identified that the resident preferred a shower and their scheduled bathing days were Saturday and Wednesday evenings.

Resident #011's plan of care was reviewed, and identified that the resident preferred a shower and their scheduled bathing days were Saturday and Wednesday evenings.

The POC (point of care) records for resident #005 were reviewed for bathing and identified that there was no task completed on four dates in a three month period. The POC records indicated that the next time the task did occur was the next regularly scheduled shower. Progress notes were also reviewed and there was no documentation to support that bathing did occur at these scheduled times.

The POC (point of care) records for resident #011 were reviewed for bathing and identified that there was no task completed on two dates in a one month period. The POC records indicated that the next time the task did occur was the next regularly scheduled shower. Progress notes were also reviewed and there was no documentation to support that bathing did occur at these scheduled times.

As per interviews with the Administrator, RPN and PSW, the bathing task does not always occur because of staffing, especially on the weekend. A bed bath is offered however this is not the residents first preference.

Sources: Administrator, RPN and PSW interviews and resident health care record. [r. 33. (1)] [s. 33. (1)]

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 ensuring that each resident of the home is bathed, at minimum, twice a week by the method of his or her choice and more frequently as determined by the residents hygiene requirements, unless contraindicated by a medical condition, to be implemented voluntarily.

Issued on this 8th day of December, 2021

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

Original report signed by the inspector.