Ontario

Ministry of Health and Long-Term Care

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

Ministére de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers 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
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
May 30, Jun 2, 29, 2011	2011_067171_0003	Complaint

Licensee/Titulaire de permis

ST. JOSEPH'S HEALTH SYSTEM
574 Northcliffe Avenue, DUNDAS, ON, L9H-7L9

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

ST JOSEPH'S HEALTH CENTRE, GUELPH
100 WESTMOUNT ROAD, GUELPH, ON, N1H-5H8

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

ELISA WILSON (171)

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 director of care, registered staff, personal support workers and residents.

During the course of the inspection, the inspector(s) reviewed plans of care for identified residents.

The following Inspection Protocols were used in part or in whole during this inspection:
Dignity, Choice and Privacy

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Definitions	Définitions
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	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 of "requirement under this Act" in subsection 2(1) of the LTCHA.)	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care

Specifically failed to comply with the following subsections:

s. 6. (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,
(a) the planned care for the resident;
(b) the goals the care is intended to achieve; and
(c) clear directions to staff and others who provide direct care to the resident. 2007, c. 8, s. 6 (1).

s. 6. (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan. 2007, c. 8, s. 6 (7).

Findings/Faits sayants :

1. The care set out in the plan of care was not provided for for an identified resident regarding the frequency of being weighed. Physician's orders in the paper chart and weight information in Point Click Care was reviewed on May 30, 2011. The documentation does not support the frequency of taking weights as per the physician's orders on 12 occasions over a three month period. Staff confirmed that all weights taken are recorded in Point of Care and can then be viewed in Point Click Care.
2. The plan of care does not set out clear direction to staff regarding bathing for an identified resident. The summary care plan in Point Click Care reviewed on May 30,2011 indicates a different schedule from Point of Care, which is different again from the bath list posted in the nursing unit. Staff indicate a change had been made recently, however there is no documentation regarding the change.
3. The plan of care for an identified resident does not provide clear direction to staff regarding bathing preferences. The summary care plan in Point Click Care reviewed on May 30, 2011, indicates the resident prefers baths, however the bath list posted in the nurses station indicates the resident is to have showers.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 33. Bathing

Specifically failed to comply with the following subsections:

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 sayants :

1. Each resident in the Home is not bathed, at a minimum, twice a week. According to documentation in Point of Care, reviewed on May 30, 2011, an identified resident did not get bathed twice in one identified week. In one week the documentation regarding bathing read "activity did not occur" one day and there was no documentation regarding bathing on any other day that week. There were no progress notes indicating this change from the prescribed plan of care. Staff confirm that the documentation "activity did not occur" means no bath was given that day. Staff also indicate that if there is no documentation on a particular day it could mean the activity did not happen, however a blank could also mean the staff missed entering that particular piece of information.

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Issued on this 29th day of June, 2011

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

Elisa Weiss