



**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
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**

Ottawa Service Area Office
347 Preston St 4th Floor
OTTAWA ON K1S 3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347 rue Preston 4^{ième} étage
OTTAWA ON K1S 3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

Public Copy/Copie du public

Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
May 25, 2015	2015_290551_0012	O-002073-15	Complaint

Licensee/Titulaire de permis

The Corporations of the United Counties of Leeds and Grenville, the City of Brockville,
the Town of Gananoque and the Town of Prescott
c/o St. Lawrence Lodge 1803 County Road 2 BROCKVILLE ON K6V 5T1

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

ST. LAWRENCE LODGE
1803 County Road, #2 East Postal Bag #1130 BROCKVILLE ON K6V 5T1

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

MEGAN MACPHAIL (551)

Inspection Summary/Résumé de l'inspection



**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**

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

This inspection was conducted on the following date(s): May 7, 2015.

During the course of the inspection, the inspector(s) spoke with Personal Support Workers (PSWs), Registered Nursing Staff, the Registered Dietitian (RD), an Assistant Director of Care (ADOC), the Director of Care (DOC) and the Administrator.

**The following Inspection Protocols were used during this inspection:
Nutrition and Hydration**

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>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 O.Reg 79/10, s. 71. Menu planning
Specifically failed to comply with the following:**

s. 71. (3) The licensee shall ensure that each resident is offered a minimum of, (a) three meals daily; O. Reg. 79/10, s. 71 (3).

Findings/Faits saillants :

1. The licensee has failed to ensure that Resident #1 is offered a minimum of three meals a day.

Resident #1 has resided at the home since 2014. The resident is on a regular texture



diet and is able to feed himself/herself.

Resident #1's family member stated that the resident does not like to leave his/her room. Resident #1's family member stated that when the resident refuses to leave his/her room for a meal, a meal is not provided. The family member stated that she comes to the home every second day at lunch and is able to bring a meal tray to the resident's room.

In an interview with the Director of Care (DOC), Inspector #551 was informed that if a resident refuses to eat in the dining room, the resident is not given a meal but is offered an oral liquid supplement. The DOC stated that a resident would not be provided with a meal in his or her room unless the resident was ill or there has been an assessed need. The DOC stated that there was no assessed reason as to why Resident #1 cannot come to the dining room for meals.

The Assistant Director of Care (ADOC) stated that the home has tried several interventions to get Resident #1 to leave his/her room for meals but these interventions were not successful.

Personal Support Workers (PSWs) #101, 102 and 103 were interviewed and each stated that Resident #1 does not like to leave his/her room and will not attend meals in the dining room. The PSWs stated that Resident #1 is encouraged to eat meals in the dining room, but when the resident refuses to leave his/her room, no meal is offered as the home does not permit tray service unless the resident is constantly supervised while eating the meal in his or her room.

PSWs #101 and 102 stated that when Resident #1 refuses to come to the dining room, no meal is provided, and they ensure that snacks are provided when the nourishment cart is circulated.

PSW #103 stated that when Resident #1 refuses to come to the dining room for breakfast, no meal is provided, and he ensures that the resident receives fluids. PSW #103 stated that a member of Resident #1's family comes in most days to provide him/her with a meal at lunch as the family can bring a tray of food to the resident's room and provide supervision while eating.

RPN #104 stated that when Resident #1 refuses to come to the dining room, no meal is provided, and the resident is offered 90ml of Resource.



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

A review of the progress notes from May 1-7, 2015 indicates that Resident #1 refused to come to the dining room and was therefore not offered a meal thirteen times. [s. 71. (3) (a)]

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 to ensure that Resident #1 is offered a minimum of three meals daily, to be implemented voluntarily.

Issued on this 29th day of May, 2015

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

Original report signed by the inspector.