

Ministry of Long-Term Care
Long-Term Care Operations Division
Long-Term Care Inspections Branch

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Original Public Report

Report Issue Date: July 19, 2023	
Inspection Number: 2023-1584-0003	
Inspection Type: Complaint Critical Incident System	
Licensee: The Corporations of the United Counties of Leeds and Grenville, the City of Brockville, the Town of Gananoque and the Town of Prescott	
Long Term Care Home and City: St. Lawrence Lodge, Brockville	
Lead Inspector Anna Earle (740789)	Inspector Digital Signature
Additional Inspector(s)	

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): July 6 - 13, 2023

The following intake(s) were inspected:

- Intake: #00087210 - CI#M576-000019-23 - Fall of resident resulting in injury.
- Intake: #00090461 - Complaint regarding concerns with care and services.

The following intake was completed in this inspection: Intake #00087210, CI#M576-000019-23 that was related to falls.

The following **Inspection Protocols** were used during this inspection:

Resident Care and Support Services
Infection Prevention and Control
Falls Prevention and Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of Care

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 6 (7)

The licensee failed to ensure that hourly safety checks were completed as set out in the plan of care for resident during a night shift in July 2023.

Rational and Summary:

A review of a resident's plan of care indicated that the resident was to have safety checks hourly while in bed. Interviews with staff and the Director of Care (DOC) confirmed that the resident required hourly safety checks during the night shifts and staff working a night in July 2023, could not recall or confirm if resident had hourly safety checks completed on that night.

Failure to follow a resident's plan of care places a resident at risk for not being provided the care and safety they require.

Sources: Resident's progress notes and plan of care; Video Surveillance Log of when staff entered and exited resident's room and interviews with PSW's, RPN and DOC.

[740789]

WRITTEN NOTIFICATION: Documentation

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 6 (9) 1.

The licensee has failed to ensure that the provision of hourly safety monitoring set out for resident's plan of care has been documented.

Rational and Summary:

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Resident's plan of care, revised in May 2023, stated, resident is to be monitored every hour while in bed and document hourly checks in flow sheet. A review of the point of care (POC) documentation, the point click care (PCC) and resident's progress notes related to hourly safety monitoring completion indicated that there was no documentation for resident's hourly checks on a night in July 2023. A review of Video Surveillance Log indicated a staff member entered and exited resident's room four times between 12:00am and 7:00am with no recorded documentation of hourly safety checks being completed. During an interview with a PSW, it was stated that the resident does require hourly checks on nights, but the PSW was unable to recall or confirm if the checks were documented. During an interview with Director of Care (DOC), it was stated that documentation for resident's safety checks could not be provided for a night in July 2023.

Sources: Review of progress notes, POC and PCC documentation, interviews with PSW's and DOC.

[740789]



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**Inspection Report Under the
Fixing Long-Term Care Act, 2021**

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