



**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**

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## **Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du apport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Nov 7, 2014	2014_257518_0045	005913-14	Complaint

### **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**

Berkshire Care Centre  
350 DOUGALL AVENUE WINDSOR ON N9A 4P4

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

ALISON FALKINGHAM (518)

## **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): November 6, 2014**

**During the course of the inspection, the inspector(s) spoke with the Administrator, the Maintenance Supervisor, a Nurse Practitioner, the residents' power of attorney.**

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



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**Admission and Discharge  
Dignity, Choice and Privacy  
Nutrition and Hydration  
Safe and Secure Home**

**During the course of this inspection, Non-Compliances were issued.**

**3 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 LTCHA, 2007 S.O. 2007, c.8, s. 6.**

**Plan of care**

**Specifically failed to comply with the following:**

- 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; 2007, c. 8, s. 6 (1).**
  - (b) the goals the care is intended to achieve; and 2007, c. 8, s. 6 (1).**
  - (c) clear directions to staff and others who provide direct care to the resident. 2007, c. 8, s. 6 (1).**



**Findings/Faits saillants :**

1. The licensee has failed to ensure that the plan of care sets out clear directions to staff and others who provide direct care to the resident.

The resident had an admission bath that day but later changed the personal hygiene plans.

Upon review of the PSW flow sheets and the bath sheets this resident did receive the preferred method of bathing however the care plan had not been updated to reflect the new choice.

This was confirmed by the Administrator.

The Administrator confirmed the expectation is that the plan of care set out clear directions to the staff that provide care to the residents. [s. 6. (1) (c)]

***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 there is a written plan of care for every resident that sets out clear directions to staff and others who provide direct care to the resident, to be implemented voluntarily.***

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**WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 78. Information for residents, etc.**



**Specifically failed to comply with the following:**

**s. 78. (1) Every licensee of a long-term care home shall ensure that,**

**(a) a package of information that complies with this section is given to every resident and to the substitute decision-maker of the resident, if any, at the time that the resident is admitted; 2007, c. 8, s. 78. (1).**

**(b) the package of information is made available to family members of residents and persons of importance to residents; 2007, c. 8, s. 78. (1).**

**(c) the package of information is revised as necessary; 2007, c. 8, s. 78. (1).**

**(d) any material revisions to the package of information are provided to any person who has received the original package and who is still a resident or substitute decision-maker of a resident; 2007, c. 8, s. 78. (1).**

**(e) the contents of the package and of the revisions are explained to the person receiving them. 2007, c. 8, s. 78. (1).**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that the admission package was given to the Substitute Decision Maker at the time of admission.

During the family interview the power of attorney stated they did sign the admission consents and met with the staff and administrator however they confirmed they did not receive the admission package.

The admission package is generally given to the family by the Social worker or is placed with the admission consents by the Social Worker to be handed out by the staff.

The family states they received the admission package much later the following week by the Social Worker.

The Administrator confirms that the admission package was given to the power of attorney for this resident by the social worker in the following week.

The Administrator confirms the expectation is that the admission package is to be given to the family the day of admission. [s. 78. (1) (a)]

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**WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 231. Resident records**

**Every licensee of a long-term care home shall ensure that,**

**(a) a written record is created and maintained for each resident of the home; and  
(b) the resident's written record is kept up to date at all times. O. Reg. 79/10, s. 231.**

**Findings/Faits saillants :**

1. The licensee failed to ensure that,(b) the resident's written record is kept up to date at all times. O. Reg. 79/10, s. 231.

There is a multiple page admission document that itemizes all the activities to take place on Day 1, Day 2, Day 3, Day 14 and Day 21 followed by a date and signature to Managers to review.

This document as well as admission continence assessment and pain assessment were reviewed with the Administrator.

There were 37 items on these documents that required a date and a signature by an RN, Dietary, Physiotherapy and Management.

The Administrator confirmed these documents were not fully completed.

The Administrator confirmed the expectation is that all written resident records be kept up to date. [s. 231. (b)]

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**Issued on this 27th day of November, 2014**

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

**Original report signed by the inspector.**