



**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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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Oct 17, 2013	2013_237500_0002	T-516-13	Complaint

**Licensee/Titulaire de permis**

**TORONTO LONG-TERM CARE HOMES AND SERVICES  
55 JOHN STREET, METRO HALL, 11th FLOOR, TORONTO, ON, M5V-3C6**

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

**WESBURN MANOR  
400 The West Mall, ETOBICOKE, ON, M9C-5S1**

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

**NITAL SHETH (500)**

**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 09,10,11, 2013**

**During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care, Nurse Manager, Nutrition Manager, Registered Nursing Staff, Personal Care Aides, Resident**

**During the course of the inspection, the inspector(s) observed the provision of care to residents, reviewed clinical records, reviewed the home's policies related to skin and wound, nutrition and hydration**

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

**Responsive Behaviours**



**Skin and Wound Care**

**Findings of Non-Compliance were found during this inspection.**

**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

<b>Legend</b>	<b>Legendé</b>
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité 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 O.Reg 79/10, s. 50. Skin and wound care**

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

- s. 50. (2) Every licensee of a long-term care home shall ensure that,**
- (b) a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds,**
- (i) receives a skin assessment by a member of the registered nursing staff, using a clinically appropriate assessment instrument that is specifically designed for skin and wound assessment,**
  - (ii) receives immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required,**
  - (iii) is assessed by a registered dietitian who is a member of the staff of the home, and any changes made to the resident's plan of care relating to nutrition and hydration are implemented, and**
  - (iv) is reassessed at least weekly by a member of the registered nursing staff, if clinically indicated; O. Reg. 79/10, s. 50 (2).**
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**Findings/Faits saillants :**

1. The licensee failed to ensure that a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, is reassessed at least weekly by a member of the registered nursing staff.[s. 50. (2) (b) (iv)]

A review of resident #001's clinical records for an identified period of time revealed that resident #001 had been readmitted to the home from hospital with altered skin integrity. A review of resident #001's clinical record revealed that resident #001's altered skin integrity had not been reassessed at least weekly by a member of the registered nursing staff for an identified period of time. [s. 50. (2) (b) (iv)]

2. A review of resident #004's clinical records for an identified period of time revealed that resident #004 had been identified with altered skin integrity on an identified date. A review of resident #004's clinical record revealed that resident #004's skin integrity had not been reassessed at least weekly by a member of registered nursing staff for an identified period of time.

An interview with the lead from the home's skin and wound program confirmed that resident #001 and #004 both identified with altered skin integrity had not been reassessed by a member of the registered nursing staff at least weekly for an identified period of time. [s. 50. (2) (b) (iv)]



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***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 a resident exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, is reassessed at least weekly by a member of the registered nursing staff, to be implemented voluntarily.***

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**Issued on this 21st day of October, 2013**

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

*Nital*