



**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**

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**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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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Mar 3, 2014	2014_200148_0005	O-000043- 14 AND O- 000060-14	Complaint

Licensee/Titulaire de permis

OMNI HEALTH CARE LIMITED PARTNERSHIP
1840 LANSDOWNE STREET WEST, UNIT 12, PETERBOROUGH, ON, K9K-2M9

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

WOODLAND VILLA
30 Milles Roches Road, R. R. #1, Long Sault, ON, K0C-1P0

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

AMANDA NIXON (148)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): January 27 and 29, 2014, on site.

This inspection included three complaints: Ottawa Service Area Office Log #O-000043-14, #O-000060-14 and #O-000077-14

During the course of the inspection, the inspector(s) spoke with the home's Administrator, Director of Care, Nutritional Manager, Registered Dietitian (RD), Registered Nursing Staff, Personal Support Workers (PSW), Dietary Aids, residents and family members.

During the course of the inspection, the inspector(s) reviewed resident health care records including plans of care and assessment data. The Inspector also reviewed the dietary department scheduling and dietary staffing qualifications.

The following Inspection Protocols were used during this inspection:

Dignity, Choice and Privacy

Food Quality

Nutrition and Hydration

Sufficient Staffing

Findings of Non-Compliance were found during this inspection.



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
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 LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care

Specifically failed to comply with the following:

s. 6. (2) The licensee shall ensure that the care set out in the plan of care is based on an assessment of the resident and the needs and preferences of that resident. 2007, c. 8, s. 6 (2).

Findings/Faits saillants :



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1. The licensee failed to comply with LTCHA, 2007 S.O. 2007, c.8, s.6(2), whereby the licensee did not ensure that the plan of care for Resident #1 was based on the resident's needs and preferences.

The most current plan of care indicates that Resident #1 requires nutritional interventions including a fluid restriction and protein with limits of specific food items. The health care record for this resident indicates disease processes that may require nutritional intervention.

The resident was interviewed on several occasions throughout the inspection. It was determined through interviews and observation that the resident maintains his/her choice to comply with the recommended nutritional interventions and that the resident has specific beliefs related to his/her disease process, food choices and food preparation.

The Inspector interviewed the Registered Dietitian in the home responsible for Resident #1's nutritional care. He indicated that the resident chooses not to comply with interventions outlined in the plan of care. The resident has been educated and is encouraged to follow nutritional recommendations, however, maintains his/her independence in food and fluid choices. He added that due to the resident's disease process, the resident may benefit from the management of sodium, protein and fluid, however, the resident is not agreeable or compliant with such interventions.

Interviews with the RD, Nutritional Manager and PSWs responsible for Resident #1's care, all indicated that the resident consumes many meals and snacks in the resident's room. For this reason the home is not able to accurately determine the resident's intake or the macro/micronutrient content of his/her diet. Staff indicated that the resident makes independent food choices and does not follow the restrictions in place.

The plan of care for Resident #1 does not reflect the resident's current needs or preferences as it relates to the resident's choices and preparation of food. In addition, the plan of care does not clearly reflect the resident's needs for therapeutic nutritional intervention, the implementation of such interventions and risks associated with the resident's compliance to such interventions. [s. 6. (2)]



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Issued on this 3rd day of March, 2014

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

Amanda Nixon, RD LTCH Inspector