Ontario

Inspection Report under the *Long-Term Care Homes Act, 2007*

Rapport d'inspection prévue le *Loi de 2007 les foyers de soins de longue durée*

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

Ministère de la Santé et des Soins de longue durée
Division de la responsabilisation et de la performance du système de santé
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☐ **Licensee Copy/Copie du Titulaire** ☒ **Public Copy/Copie Public**

Date(s) of inspection/Date de l'inspection	**Inspection No/ d'inspection**	**Type of Inspection/Genre d'inspection**
Dec 2, 3, 2010	2010-173-2927-02Dec083948	Complaint Log #H00597 CIS Review Log # H00834

Licensee/Titulaire
St. Peter"s Care Centres
125 Redfern Ave, Hamilton, Ontario L9C 7W9

Long-Term Care Home/Foyer de soins de longue durée
St.Peter's Residence at Chedoke
125 Redfern Ave, Hamilton, Ontario L9C 7W9

Name of Inspector(s)/Nom de l'inspecteur(s)
Lesa Wulff – LTC Inspector – Nursing - #173

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection and Critical incident review

During the course of the inspection, the inspector spoke with: Administrator, Director of Care, RAI coordinator, registered staff, personal support workers (PSW's), residents and resident families.

During the course of the inspection, the inspector(s): Reviewed policy and procedure, reviewed resident clinical health records, and reviewed archived health records.

The following Inspection Protocols were used during this inspection:
Falls Prevention Inspection Protocol
Personal Support Services Inspection Protocol

☒ Findings of Non-Compliance were found during this inspection. The following action was taken:

2 WN
1 VPC

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA. 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 suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée. Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8 s.22(1)
Every licensee of a long-term care home who receives a written complaint concerning the care of a resident or the operation of the long-term care home shall immediately forward it to the Director.

Findings:

1. The Administrator of the home received a written letter of complaint in 2010. The letter of complaint was not forwarded to the Ministry of Health as required.

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WN #2: The Licensee has failed to comply with O Reg 79/10, s24(9)(c)
The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised when
(c) the care set out in the plan of care has not been effective.

Findings:

1. A critical incident report was received by Hamilton Service Area office in 2010. An identified resident transferred from bed and sustained a fall with an injury. Upon review of the clinical record, this resident has a long standing history of self transfers, climbing out of bed, agitated behaviours that disturb sleep. Although the plan of care for this resident has been signed by staff as reviewed, reassessment and revision to the plan of care has not occurred. The plan of care for this resident has not been revised when the residents risk behaviors continued and care set out in the plan of care has not been effective.

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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 related to developing a process to ensure that a resident is reassessed and the plan of care reviewed and revised when the care set out in the plan of care has not been effective, to be implemented voluntarily.

Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné	Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé. Aug 30/11 **Revised August 30, 2011 for the purpose of publication**
Title: **Date:**	**Date of Report:** (if different from date(s) of inspection).