



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
Jan 15, 2014	2013_188168_0043	H-000429-13	Follow up

Licensee/Titulaire de permis

THE REGIONAL MUNICIPALITY OF NIAGARA
2201 ST. DAVID'S ROAD, THOROLD, ON, L2V-4T7

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

THE WOODLANDS OF SUNSET
920 PELHAM STREET, WELLAND, ON, L3C-1Y5

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

LISA VINK (168), BERNADETTE SUSNIK (120)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): December 18, 2013.

This inspection was conducted with inspector Robin Mackie.

This inspection was a Follow Up to inspection 2013-189120-0034, conducted by inspector Bernadette Susnik #120, regarding compliance order #001 related to Ontario Regulation 79/10 section 15(1) regarding bed rails.

During the course of the inspection, the inspector(s) spoke with the Director of Care (DOC), the Resident Assessment Instrument (RAI) Coordinator, registered staff and residents.

During the course of the inspection, the inspector(s) observed the provision of care and services, reviewed clinical records and relevant documents including policies and procedures.

The following Inspection Protocols were used during this inspection:

**Minimizing of Restraining
Safe and Secure Home**

Findings of Non-Compliance were found during this inspection.



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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. 33. PASDs that limit or inhibit movement



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Specifically failed to comply with the following:

s. 33. (4) The use of a PASD under subsection (3) to assist a resident with a routine activity of living may be included in a resident's plan of care only if all of the following are satisfied:

1. Alternatives to the use of a PASD have been considered, and tried where appropriate, but would not be, or have not been, effective to assist the resident with the routine activity of living. 2007, c. 8, s. 33 (4).
2. The use of the PASD is reasonable, in light of the resident's physical and mental condition and personal history, and is the least restrictive of such reasonable PASDs that would be effective to assist the resident with the routine activity of living. 2007, c. 8, s. 33 (4).
3. The use of the PASD has been approved by,
 - i. a physician,
 - ii. a registered nurse,
 - iii. a registered practical nurse,
 - iv. a member of the College of Occupational Therapists of Ontario,
 - v. a member of the College of Physiotherapists of Ontario, or
 - vi. any other person provided for in the regulations. 2007, c. 8, s. 33 (4).
4. The use of the PASD has been consented to by the resident or, if the resident is incapable, a substitute decision-maker of the resident with authority to give that consent. 2007, c. 8, s. 33 (4).
5. The plan of care provides for everything required under subsection (5). 2007, c. 8, s. 33 (4).

Findings/Faits saillants :



1. The use of a personal assistance services device (PASD) to assist a resident with a routine activity of living was included in a resident's plan of care without all of the following being satisfied:

1. Alternatives to the use of a PASD had been considered and tried where appropriate.
2. The use of the PASD was the least restrictive that would be effective to assist the resident.
3. The use of the PASD was approved by, i. a physician, ii. a registered nurse, iii. a registered practical nurse, iv. a member of the College of Occupational Therapists of Ontario, v. a member of the College of Physiotherapists of Ontario, or vi. any other person provided for in the regulations.

A. The plan of care for resident #001 identified the use of bed rails as a PASD, when in bed to support bed mobility. A review of the clinical record did not include the alternatives tried, that the PASD was the least restrictive method or who approved the use of the device.

B. The plan of care for resident #002 identified the use of bed rails as a PASD, when in bed to support bed mobility. A review of the clinical record did not include the alternatives tried, that the PASD was the least restrictive method or who approved the use of the device.

C. The plan of care for resident #003 identified the use of bed rails as a PASD, when in bed to support bed mobility. A review of the clinical record did not include the alternatives tried, that the PASD was the least restrictive method or who approved the use of the device.

Interview with the DOC identified that the home had informal processes in place to assess residents to determine the need for and type of bed rails to be used, however this information was not consistently recorded in the clinical records. The DOC reviewed the identified records and reported that she was unsuccessful in locating documentation required regarding alternatives tried, that the devices were assessed to be the least restrictive methods or the approval of the PASD's. [s. 33. (4)]



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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 the use of a personal assistance services device (PASD) to assist a resident with a routine activity of living are included in a resident's plan of care when all of the following are satisfied:

- 1. Alternatives to the use of a PASD are considered and tried where appropriate.**
- 2. The use of the PASD is the least restrictive that would be effective to assist the resident.**
- 3. The use of the PASD is approved by, i. a physician, ii. a registered nurse, iii. a registered practical nurse, iv. a member of the College of Occupational Therapists of Ontario, v. a member of the College of Physiotherapists of Ontario, or vi. any other person provided for in the regulations, to be implemented voluntarily.**

THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/

LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT CONFORME AUX EXIGENCES:

COMPLIED NON-COMPLIANCE/ORDER(S) REDRESSEMENT EN CAS DE NON-RESPECT OU LES ORDRES:			
REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / NO DE L'INSPECTION	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 15. (1)	CO #001	2013_189120_0034	120



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Issued on this 15th day of January, 2014

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

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