



**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

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Division de la responsabilisation et de la performance du
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Direction de l'amélioration de la performance et de la
conformité

Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection February 11, 2011	Inspection No/ d'inspection 2011_144_2929_11Feb105635	Type of Inspection/Genre d'inspection Complaint L-00144
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Licensee/Titulaire
Chartwell Master Care LP, 100 Milverton Drive, Suite 700, Mississauga, ON L5R 4H1

Long-Term Care Home/Foyer de soins de longue durée
Royal Oak Long Term Care Centre, 1750 Division Road North, Kingsville, ON N9Y 4G7

Name of Inspector(s)/Nom de l'inspecteur(s)
Carolee Milliner (144)

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a complaint inspection related to resident care.

During the course of the inspection, the inspector spoke with two Directors of Care, one RN, one RPN & five PSW's.

During the course of the inspection, the inspector reviewed two resident clinical records, the home Resident Abuse Policy & one Critical Incident Report.

The following Inspection Protocols were used in part or in whole during this inspection:
Responsive Behaviours.

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

2 WN
2 VPC

NON- COMPLIANCE / (Non-respectés)



Definitions/Définitions	
<p>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</p>	
<p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p> <p>Non-compliance with requirements under the <i>Long-Term Care Homes Act, 2007</i> (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>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.</p> <p>Non-respect avec les exigences sur le <i>Loi de 2007 les foyers de soins de longue durée</i> 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.</p>

WN #1: The Licensee has failed to comply with LTCHA, 2007, S.O.c.8,s.6(1)(c)
Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,
(c) clear directions to staff and others who provide direct care to the resident.

Findings:
1. The written plan of care for one resident includes interventions related to "risk for invasion of personal space by high risk residents." One RN, one RPN & three PSW's on interview confirmed the written plan of care does not provide clear directions to staff and others who provide direct care to the resident.

Inspector ID #: 144

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 ensuring the written plan of care for each resident sets out clear directions to staff who provide direct care to the resident, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O. Reg. 79/10,s.8(1)(b)
Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system, and
(b) is complied with.


Findings:
1. Review of the clinical record for one resident does not provide confirmation that a nursing assessment was completed in response to an assault as required by the homes' Resident Abuse Policy.

Inspector ID #: 144

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 ensuring that the licensee plan, policy, protocol, procedure, strategy or system is complied with, 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.	
			
Title:	Date:	Date of Report: February 23, 2011	