

Ministry of Health and Long-Term Care

Inspection Report under the Long-Term Care Homes Act, 2007 Ministère de la Santé et des Soins de longue durée

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

Health System Accountability and Performance Division Performance Improvement and Compilance 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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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection	
Aug 18, Sep 29, Oct 6, 2011	2011_065169_0009	Complaint	
Licensee/Titulaire de permis			
THE REGIONAL MUNICIPALITY OF HALTON 1151 BRONTE ROAD, OAKVILLE, ON, L6M-3L1 Long-Term Care Home/Foyer de soins de longue durée			
POST INN VILLAGE 203 Georgian Drive, OAKVILLE, ON, L6H-7H9			
Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs			
YVONNE WALTON (169)			
Inspection Summary/Résumé de l'Inspection			

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

During the course of the inspection, the inspector(s) spoke with nursing staff and Director of Care.

During the course of the inspection, the inspector(s) interviewed the nursing staff and conducted a clinical review.

The following Inspection Protocols were used during this inspection: Skin and Wound Care

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON	I-RESPECT DES EXIGENCES
Legend WN - Written Notification	Legendé WN - Avis écrit
VPC - Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR - Aiguillage au directeur
CO - Compliance Order	CO - Ordre de conformité
WAO – Work and Activity Order	WAO - Ordres : travaux et activités



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Non-compliance with requirements under the Long-Term Care LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

Le non-respect des exigences de la Loi de 2007 sur les foyers de Homes Act, 2007 (LTCHA) was found. (A requirement under the 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.

> 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 subsections:

s. 6. (5) The licensee shall ensure that the resident, the resident's substitute decision-maker, if any, and any other persons designated by the resident or substitute decision-maker are given an opportunity to participate fully in the development and implementation of the resident's plan of care. 2007, c. 8, s. 6 (5).

Findings/Faits saillants:

1. The plan of care related to a resident, was not communicated to the resident's substitute decision maker. Nursing staff confirmed they did not communicate to the substitute decision maker changes to a resident's plan of care. Treatments were changed, however these changes were never communicated to the substitute decision maker. Recommendations made by the physician were not implemented or discussed with the substitute decision maker, to allow them the opportunity to participate in the development of the resident's plan of care. The resident was unable to make care decisions for themselves and the resident's substitute decision maker was not given an opportunity to participate fully in the development and implementation of the resident's plan of care.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 50. Skin and wound care Specifically failed to comply with the following subsections:

- s. 50. (2) Every licensee of a long-term care home shall ensure that,
- (a) a resident at risk of altered skin integrity receives a skin assessment by a member of the registered nursing staff.
- (i) within 24 hours of the resident's admission.
- (ii) upon any return of the resident from hospital, and
- (iii) upon any return of the resident from an absence of greater than 24 hours:
- (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;
- (c) the equipment, supplies, devices and positioning aids referred to in subsection (1) are readily available at the home as required to relieve pressure, treat pressure ulcers, skin tears or wounds and promote healing; and (d) any resident who is dependent on staff for repositioning is repositioned every two hours or more frequently as required depending upon the resident's condition and tolerance of tissue load, except that a resident shall only be repositioned while asleep if clinically indicated. O. Reg. 79/10, s. 50 (2).

Findings/Faits saillants:

1. Weekly wound assessments by a member of the registered staff were not completed consistently for an identified. A period of 16 days and 9 days passed between assessments.



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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 that ensures all resident's exhibiting altered skin integrity, including skin breakdown, pressure ulcers, skin tears or wounds, are re-assessed at least weekly by a member of the registered nursing staff, if clinically indicated, to be implemented voluntarily.

Issued on this 6th day of October, 2011

4 Walter

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