

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

**Rapport d'inspection prévue
sous la Loi de 2007 sur les foyers
de soins de longue durée**

**Long-Term Care Homes Division
Long-Term Care Inspections Branch**

**Division des foyers de soins de
longue durée
Inspection de soins de longue durée**

Sudbury Service Area Office
159 Cedar Street Suite 403
SUDBURY ON P3E 6A5
Telephone: (705) 564-3130
Facsimile: (705) 564-3133

Bureau régional de services de
Sudbury
159, rue Cedar Bureau 403
SUDBURY ON P3E 6A5
Téléphone: (705) 564-3130
Télécopieur: (705) 564-3133

Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Dec 10, 2019	2019_740621_0035	021038-19	Follow up

Licensee/Titulaire de permis

CVH (No. 9) LP by its general partners, Southbridge Health Care GP Inc. and Southbridge Care Homes (a limited partnership, by its general partner, Southbridge Care Homes Inc.)

766 Hespeler Road, Suite 301 CAMBRIDGE ON N3H 5L8

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

Southbridge Pinewood
2625 Walsh Street East THUNDER BAY ON P7E 2E5

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

JULIE KUORIKOSKI (621)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): December 4 - 6, 2019.

**The following Compliance Order (CO), issued during inspection
#2019_703625_0016 was inspected during this Follow Up Inspection:**

- One intake, regarding CO #001, related to s.6(1) of the Long-Term Care Homes Act (LTCHA), 2007.

During the course of the inspection, the inspector(s) spoke with the Director of Care (DOC), the Associate Director of Care (ADOC), the Resident Assessment Instrument (RAI) Coordinator, Registered Practical Nurses (RPNs), Personal Support Worker's (PSWs), and residents.

The Inspector also conducted a daily tour of resident care areas; observed the provision of care and services to residents; reviewed the home's supporting documentation, including relevant health care records, and specific licensee policies, procedures and programs.

The following Inspection Protocols were used during this inspection:

Continence Care and Bowel Management

Falls Prevention

Medication

Minimizing of Restraining

Pain

Personal Support Services

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

0 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO NO DE L'INSPECTEUR
LTCHA, 2007 S.O. 2007, c.8 s. 6. (1)	CO #001	2019_703625_0016	621

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Légende
<p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</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 O.Reg 79/10, s. 231. Resident records

Every licensee of a long-term care home shall ensure that,

- (a) a written record is created and maintained for each resident of the home; and**
- (b) the resident's written record is kept up to date at all times. O. Reg. 79/10, s. 231.**

Findings/Faits saillants :

1. The licensee has failed to ensure that the resident's written record was kept up to date at all times.

During follow up of Compliance Order #001, with respect to resident #004's use a specific safety device, Inspector #621 reviewed the resident's most current care plan, which identified that the specified safety device was to be monitored at identified intervals.

On further review of resident #004's healthcare record, Inspector #621 identified a specific record which indicated that the safety device was to be monitored at specific time intervals. Additionally, the Inspector found missing documentation for a specific number of dates and times, where required checks of the safety device, were not recorded.

During an interview with the home's Resident Assessment Instrument (RAI) Coordinator, they reported that in keeping with the home's policy, they revised resident #004's care plan, starting on a particular date in December 2019, to include monitoring checks of resident #004's safety device, at specified time intervals. The RAI Coordinator identified that PSW's were to complete the required monitoring and document this within a specific area of the resident's healthcare record. On review of resident #004's December 2019 healthcare record, the RAI Coordinator confirmed that there was missing documentation for the three identified dates and times, related to safety device monitoring.

During an interview with the Associate Director of Care, they reported that it was their expectation, that if a resident's care plan identified safety device monitoring at specified intervals of time, that staff documented the required monitoring as per the home's process. [s. 231. (b)]

Issued on this 11th day of December, 2019

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

Original report signed by the inspector.