

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

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Aug 28, 2019	2019_791739_0024	010137-19, 014782-19	Complaint

Licensee/Titulaire de permis

AXR Operating (National) LP, by its general partners
c/o Revera Long Term Care Inc. 5015 Spectrum Way, Suite 600 MISSISSAUGA ON
L4W 0E4

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

Riverside Place
3181 Meadowbrook Lane WINDSOR ON N8T 0A4

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

JULIE DALESSANDRO (739)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): August 14, 15, 16, 22, 23, and 26, 2019

The following complaint inspections were conducted:

Log #010137-19 / IL-66844-LO related to short staffing, continence care, bathing, and wheelchair cleanliness.

Log #014782-19 / IL-68785-LO related to continence care, personal support services, skin and wound care, and recreation.

During the course of the inspection, the inspector(s) spoke with Personal Support Worker(s), Recreation Aide(s), Registered Practical Nurse(s), the home's Wound Care Nurse, Assistant Director of Nursing, Director of Nursing, and Executive Director.

During the course of this inspection the inspector(s) also conducted record reviews and observations relevant to the inspection.

The following Inspection Protocols were used during this inspection:

Continence Care and Bowel Management

Personal Support Services

Recreation and Social Activities

Skin and Wound Care

Sufficient Staffing

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)

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>Légende</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. 6. Plan of care

Specifically failed to comply with the following:

- s. 6. (9) The licensee shall ensure that the following are documented:**
- 1. The provision of the care set out in the plan of care. 2007, c. 8, s. 6 (9).**
 - 2. The outcomes of the care set out in the plan of care. 2007, c. 8, s. 6 (9).**
 - 3. The effectiveness of the plan of care. 2007, c. 8, s. 6 (9).**

Findings/Faits saillants :

1. The licensee has failed to ensure that the provision of care set out in the plan of care is documented.

O. Reg 79/10 s. 33 (1) states that every licensee of a long-term care home shall ensure that each resident of the home is bathed, at a minimum, twice a week.

A complaint was called into the Ministry of Health and Long-Term Care INFOline, Log #010137-19/ IL-66844-LO. The complainant stated that the home was short Personal Support Workers and due to short staffing a bath was not provided to resident #001 on a specific date.

Record Review of Policy LTC- Bath and Shower Guidelines (last reviewed March 31, 2019), stated that the resident was offered a choice of bath, shower, bed bath or hygiene experience at least twice weekly.

Record review of the bathing task in Point of Care (POC) indicated that the resident was to receive a bath on certain days during a specific time frame.

A record review of the follow-up report in Point Click Care (PCC) for resident #001 called 'Bathing- how resident takes full body bath/shower' was missing documentation on three specific dates.

During an interview with DOC # 102 they stated that they could not confirm that care was provided for resident #001 on three specific dates related to bathing because it was not documented. DOC #102 also stated that the expectation was that baths were to be completed twice a week for residents and documented in POC.

The licensee has failed to ensure that the provision of care set out in the plan of care for resident #001 related to bathing was documented. [s. 6. (9) 1.]

Issued on this 28th day of August, 2019

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

Original report signed by the inspector.