

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

Ministère de la Santé et des Soins de longue durée

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

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

Ottawa Service Area Office 347 Preston St Suite 420 OTTAWA ON K1S 3J4 Telephone: (613) 569-5602 Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa 347 rue Preston bureau 420 OTTAWA ON K1S 3J4 Téléphone: (613) 569-5602 Télécopieur: (613) 569-9670

Public Copy/Copie du public

Report Date(s) / Date(s) du apport

Inspection No / No de l'inspection

Log # / Registre no Type of Inspection / **Genre d'inspection**

Feb 10, 2016

2016 450138 0005

000275-14, 007358-15, Critical Incident 012419-15, 019162-15 System

Licensee/Titulaire de permis

The Corporation of the County of Renfrew 9 INTERNATIONAL DRIVE PEMBROKE ON K8A 6W5

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

BONNECHERE MANOR 470 ALBERT STREET RENFREW ON K7V 4L5

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs PAULA MACDONALD (138)

Inspection Summary/Résumé de l'inspection



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

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

The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): February 4, 5, 8, and 9, 2016.

This inspection was a result of four Critical Incidents: one relating to a resident fall and the remaining three relating to resident abuse or neglect.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, a Resident Care Coordinator, the Administrative Assistant, maintenance personnel, registered nurses, personal support workers, and a food service worker.

The Inspector also reviewed Critical Incident Reports, reviewed resident health care records, reviewed internal investigation documents, reviewed employee training records, and reviewed the policy "Falls Prevention Program".

The following Inspection Protocols were used during this inspection: Falls Prevention
Prevention of Abuse, Neglect and Retaliation
Responsive Behaviours
Safe and Secure Home

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

- 1 WN(s)
- 1 VPC(s)
- 0 CO(s)
- 0 DR(s)
- 0 WAO(s)



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

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

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
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).	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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. 76. Training

Specifically failed to comply with the following:

s. 76. (4) Every licensee shall ensure that the persons who have received training under subsection (2) receive retraining in the areas mentioned in that subsection at times or at intervals provided for in the regulations. 2007, c. 8, s. 76. (4).

Findings/Faits saillants:



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

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

1. The licensee failed to comply with section 76.(4) of the Act in that the licensee failed to ensure that the persons who received training under subsection (2) receive retraining in the areas mentioned in that subsection at intervals provided for in the regulations.

In accordance with this section, section 76.(2)3. and 4. of the Act, and section 219.(1) of the regulation, the licensee is required to provide annual retraining of the home's policy to promote zero tolerance of abuse and neglect of residents as well as the duty under section 24 to make mandatory reports to all staff of the home.

On February 4, 2016, the Inspector requested the annual retraining for staff member #100 for 2015 from the Director of Care. The Inspector reviewed the training and noted that the staff member had received retraining on abuse but had not received specific retraining in 2015 regarding the home's policy to promote zero tolerance of abuse and neglect (including making mandatory reports under section 24 of the Act). The Director of Care stated that the home had previously provided this training but that it had been overlooked in the transition to on line training approximately two years ago. The Inspector also reviewed the training records for staff member #101 for 2014 and noted that this staff member also did not receive retraining regarding the home's policy to promote zero tolerance of abuse and neglect (including making mandatory reports under section 24 of the Act).

The Inspector further spoke with the Director of Care and she stated that the on line training requirements in the home had been updated during the course of this inspection and now included is the home's policy to promote zero tolerance of abuse and neglect (including making mandatory reports under section 24 of the Act). She stated that in 2016 and forward, all staff will complete the required training.

Log #012419-15 and Log #007358-15 [s. 76. (4)]



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

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

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 staff have been retrained annually on the home's policy to promote zero tolerance of abuse and neglect of residents, to be implemented voluntarily.

Issued on this 10th day of February, 2016

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

Original report signed by the inspector.