



**Ministry of Health and
Long-Term Care**

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

**Long-Term Care Homes Division
Long-Term Care Inspections Branch**
**Division des foyers de soins de
longue durée**
Inspection de soins de longue durée

London Service Area Office
130 Dufferin Avenue 4th floor
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**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**

Bureau régional de services de
London
130 avenue Dufferin 4ème étage
LONDON ON N6A 5R2
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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
May 1, 2017	2017_538144_0013	005671-17	Complaint

Licensee/Titulaire de permis

THE CORPORATION OF THE COUNTY OF ELGIN MUNICIPAL HOMES
39262 Fingal Line RR #1 ST. THOMAS ON N5P 3S5

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

BOBIER VILLA
1 BOBIER LANE DUTTON ON N0L 1J0

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

CAROLEE MILLINER (144)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): March 22, 2017

This complaint inspection was related to skin and wound care.

During the course of the inspection, the inspector(s) spoke with one Physician, the Administrator, Manager of Resident Care, one Pharmacist, Manager of Support Services, the Registered Dietician, one Registered Nurse, one Registered Practical Nurse and two Health Care Aides.

One resident clinical record was reviewed.

The following Inspection Protocols were used during this inspection:

Nutrition and Hydration

Skin and Wound Care

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)**



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NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend

WN – Written Notification
VPC – Voluntary Plan of Correction
DR – Director Referral
CO – Compliance Order
WAO – Work and Activity Order

Legendé

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).

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 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:

s. 6. (2) The licensee shall ensure that the care set out in the plan of care is based on an assessment of the resident and the needs and preferences of that resident. 2007, c. 8, s. 6 (2).

Findings/Faits saillants :



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1. The licensee has failed to ensure that the plan of care was based on an assessment of the resident and the resident's needs and preferences.

The clinical record for a resident stated nursing personnel were to allow for flexibility in the resident's activities of daily living to accommodate the resident's specific needs.

The Manager of Resident Care acknowledged that documentation in the resident's clinical notes did not support flexibility with the plan of care for the resident on two identified dates.

The licensee failed to ensure that the resident's plan of care was based on an assessment of the resident and the resident's needs and preferences.

The severity of this issue was determined to be level 2 with minimal harm or potential for actual harm. The scope of this issue was isolated throughout the inspection. The home has a history of non-compliance with this section of the regulation as it was previously issued as a Voluntary Plan of Corrective Action (VPC) on April 20, 2016, and a Written Notification (WN) on April 15, 2014. [s. 6. (2)]

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 that the plan of care is based on an assessment of
the resident and the resident's needs and preferences, to be implemented
voluntarily.***



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Issued on this 2nd day of May, 2017

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

Original report signed by the inspector.