



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

**Ministère de la Santé et des
Soins de longue durée**

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

**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
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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jan 3, 2013	2012_201167_0005	H-002159- 12	Complaint

Licensee/Titulaire de permis

REVERA LONG TERM CARE INC.
55 STANDISH COURT, 8TH FLOOR, MISSISSAUGA, ON, L5R-4B2

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

GARDEN CITY MANOR
168 Scott Street, St. Catharines, ON, L2N-1H2

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

MARILYN TONE (167)

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): November 29, 30, 3, 4, 5, 2012

This complaint inspection was conducted simultaneously with a Resident Quality Inspection (RQI) at the home. The following areas of non-compliance related to this Complaint Inspection will be issued on the report of the Resident Quality Inspection (Log # H-002129-12):

O.Reg. 79/10, 30(2)related to documentation

LTCHA,2007 S.O. c.8 s.3(1)11(ii) related to consent

LTCHA,2007 S.O. c.8 s.6(1)c related to the plan of care providing clear direction

During the course of the inspection, the inspector(s) spoke with the Executive Director, the Director of Care, registered staff, personal support workers, the identified resident and their family member related to complaint Log H-002159-12.

During the course of the inspection, the inspector(s) conducted a review of the health file for the identified resident, reviewed relevant policies and procedures and other relevant information pertaining to this complaint.

The following Inspection Protocols were used during this inspection:
Falls Prevention

Personal Support Services

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification	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



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 O.Reg 79/10, s. 34. Oral care
Specifically failed to comply with the following:

- s. 34. (1) Every licensee of a long-term care home shall ensure that each resident of the home receives oral care to maintain the integrity of the oral tissue that includes,**
- (a) mouth care in the morning and evening, including the cleaning of dentures; O. Reg. 79/10, s. 34 (1).**
 - (b) physical assistance or cuing to help a resident who cannot, for any reason, brush his or her own teeth; and O. Reg. 79/10, s. 34 (1).**
 - (c) an offer of an annual dental assessment and other preventive dental services, subject to payment being authorized by the resident or the resident's substitute decision-maker, if payment is required. O. Reg. 79/10, s. 34 (1).**

Findings/Faits saillants :



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1. The licensee did not ensure that the identified resident received oral care to maintain the integrity of the oral tissue that included: c) an offer of a dental assessment subject to payment being authorized by the resident or the resident's Substitute Decision Maker (SDM).

The identified resident started to complain of a sore on their lower gum in 2012. The documentation in the progress notes indicated that the soreness on the resident's lower gum area continued to cause problems over a three month time frame in 2012. Although it was possible that the soreness could have been related to the resident's lower denture, there was no documentation to indicate that this possibility was ever discussed with the resident's Substitute Decision Maker (SDM). During an interview with registered staff, the registered staff member indicated that they were not aware of anyone discussing the denture being the potential cause of the resident's sore mouth with the SDM or offering to arrange for the resident to have a dental consult. [s. 34. (1) (c)]

Issued on this 8th day of January, 2013

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

Marilyn Lone