



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

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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
Feb 25, 2014	2014_229213_0015	L-000163-14	Critical Incident System

Licensee/Titulaire de permis

RITZ LUTHERAN VILLA
R.R. 5, MITCHELL, ON, N0K-1N0

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

RITZ LUTHERAN VILLA
PART LOT 16, CON 2, LOGAN TWN, R.R. #5, MITCHELL, ON, N0K-1N0

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

RHONDA KUKOLY (213)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): February 20, 2014

This inspection was completed related to 3 Critical Incidents:

L-000163-14 CI #C555-000003-14

L-000184-14 CI #C555-000004-14

L-000194-14 CI #C555-000005-14

During the course of the inspection, the inspector(s) spoke with the Director of Care, the Assistant Director of Care, the RAI Coordinator, 2 Registered Practical Nurses, and 1 Personal Support Worker.

During the course of the inspection, the inspector(s) made observations; reviewed health records, policies, and other relevant documentation.

**The following Inspection Protocols were used during this inspection:
Prevention of Abuse, Neglect and Retaliation**

Findings of Non-Compliance were found during this inspection.



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 O.Reg 79/10, s. 51. Continence care and bowel management

Specifically failed to comply with the following:

s. 51. (2) Every licensee of a long-term care home shall ensure that, (b) each resident who is incontinent has an individualized plan, as part of his or her plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented; O. Reg. 79/10, s. 51 (2).

Findings/Faits saillants :



1. The licensee failed to ensure that each resident who is incontinent has an individualized plan, as part of his or her plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented as evidenced by:

a) Staff interview regarding Resident #1 revealed this Resident has had a change in condition, is no longer toileted and is incontinent.

Record review for Resident #1 revealed the current care plan indicated specific direction related assistance required with toileting and no direction related to assistance required with incontinence products.

The Assistant Director of Care and the RAI Coordinator confirmed that this Resident's plan of care should have been updated related to continence, toileting and assistance required with incontinence following a change in condition.

b) Staff interview regarding Resident #2 revealed this Resident is incontinent and will ring the call bell for assistance with toileting.

Record review for Resident #2 revealed the current care plan indicated specific direction related to assistance with toileting and specific times for toileting during the day. It did not include direction related to assistance with incontinence products.

The Assistant Director of Care and the RAI Coordinator confirmed that this Resident's plan of care should have included interventions related to toileting during the night and directions related to assistance required with incontinence products required during the day and night.

c) Staff interview regarding Resident #3 revealed this Resident will ring the call bell for assistance with toileting during the day. This resident is also incontinent, uses incontinence products and prefers not to go to the toilet during the night, but to have staff assistance with incontinence products during the night.

Record review regarding Resident #3 revealed the current care plan indicated specific direction related to assistance required for toileting. It did not include direction related to assistance with incontinence products during the day or the night.

The Assistant Director of Care and the RAI Coordinator confirmed that this Resident's plan of care should have included interventions related to continence and assistance required with incontinence products during the day and night. [s. 51. (2)

(b)]



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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 each resident who is incontinent has an individualized plan, as part of his or her plan of care, to promote and manage bowel and bladder continence based on the assessment and that the plan is implemented, to be implemented voluntarily.

Issued on this 7th day of March, 2014

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

Rhonda Kukoly