

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

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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

Mar 6, 2015

2015\_217137\_0006

008892-14

Complaint

#### Licensee/Titulaire de permis

RITZ LUTHERAN VILLA R.R. 5 MITCHELL ON NOK 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 NOK 1NO

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

MARIAN MACDONALD (137)

# 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): January 27, 28 and March 5, 2015

Complaint Inspections 008611-14, 009738-14, 009740-14 and 010157-14 were completed during this inspection.

During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care, Assistant Director of Care, Food Service Supervisor, Registered Dietitian, RAI-MDS Coordinator, Nursing Administrative Coordinator, Administrative Assistant, Environmental Services Supervisor, one Registered Nurse, four (4) Registered Practical Nurses, three (3) Personal Support Workers and three (3) Residents.

The inspector also observed residents, care provision, morning nourishment pass, reviewed residents' clinical records, call bell response time records, fluid intake records, staffing schedules and relevant policies and procedures.

The following Inspection Protocols were used during this inspection: Nutrition and Hydration

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	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. 71. Menu planning Specifically failed to comply with the following:

s. 71. (3) The licensee shall ensure that each resident is offered a minimum of, (b) a between-meal beverage in the morning and afternoon and a beverage in the evening after dinner; and O. Reg. 79/10, s. 71 (3).

Findings/Faits saillants:



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1. The licensee has failed to ensure that residents are offered a minimum of a betweenmeal beverage in the morning and afternoon and a beverage in the evening after dinner as evidenced by:

A tour of the home on January 27, 2015 at 1:05 pm revealed the fluids, from the morning nourishment pass, were still on the bedside tables for 27 residents.

Ten of the residents require staff assistance in order to be able to consume the fluids. The fluid intake had been recorded as consumed on Point of Care (POC) at 11:21 am, for seven of ten residents.

At 1:44 pm. the RAI-MDS Coordinator confirmed the fluids were still present from the morning nourishment pass, as well as the expectation that residents be provided the assistance and/or encouragement to consume the fluids, at the time of delivery.

Observations, on March 5, 2015 at 12:10 pm, revealed fluids from the morning nourishment pass, were still on the bedside tables for 5 of 5 residents, who require assistance or encouragement to consume the fluids.

The Administrator confirmed the fluids were still present from the morning nourishment pass, as well as the expectation that residents be provided the assistance and/or encouragement to consume the fluids, at the time of delivery. [s. 71. (3) (b)]

## 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 residents are offered a minimum of a between-meal beverage in the morning and afternoon and a beverage in the evening after dinner, to be implemented voluntarily.



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Issued on this 6th day of March, 2015

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

Original report signed by the inspector.