



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

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

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

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

**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
LONDON ON N6A 5R2
Telephone: (519) 873-1200
Facsimile: (519) 873-1300

Bureau régional de services de
London
130 avenue Dufferin 4ème étage
LONDON ON N6A 5R2
Téléphone: (519) 873-1200
Télécopieur: (519) 873-1300

Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Mar 26, 2019	2019_532590_0011	005872-19	Complaint

Licensee/Titulaire de permis

Rykka Care Centres LP
3760 14th Avenue Suite 402 MARKHAM ON L3R 3T7

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

Banwell Gardens Care Centre
3000 Banwell Road TECUMSEH ON N8N 2M4

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

ALICIA MARLATT (590)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): March 21 and 25, 2019.

During the course of the inspection, the inspector(s) spoke with the Executive Director, the Assistant Director of Care, the Business Office Manager, one Registered Nurse, one Housekeeper and one family member.

During the course of the inspection, the inspector(s) observed infection prevention and control practices, staff and resident interactions and the posting of required information.

During the course of the inspection, the inspector(s) reviewed one resident clinical record, the homes' complaint forms and policies relevant to inspection items.

**The following Inspection Protocols were used during this inspection:
Accommodation Services - Laundry
Reporting and Complaints**

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

1 WN(s)

0 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Légende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 89. Laundry service

Specifically failed to comply with the following:

s. 89. (1) As part of the organized program of laundry services under clause 15 (1) (b) of the Act, every licensee of a long-term care home shall ensure that,
(a) procedures are developed and implemented to ensure that,
(i) residents' linens are changed at least once a week and more often as needed,
(ii) residents' personal items and clothing are labelled in a dignified manner within 48 hours of admission and of acquiring, in the case of new clothing,
(iii) residents' soiled clothes are collected, sorted, cleaned and delivered to the resident, and
(iv) there is a process to report and locate residents' lost clothing and personal items; O. Reg. 79/10, s. 89 (1).

Findings/Faits saillants :

1. The licensee had failed to ensure that the residents' personal items and clothing were labelled in a dignified manner within 48 hours of admission and of acquiring, in the case of new clothing.

A complaint was received by the Ministry of Health and Long-Term Care. In an interview with the complainant they shared that their loved ones glasses, identified as resident #001, had been missing at one time.

Review of the Resident's Personal Belongings List for resident #001, showed that the resident had glasses on admission. The area to document that the glasses had been labeled was empty. This form directed that registered staff or their designate were to complete this form upon admission.

Review of the homes' complaint binder showed that a Client Service Response Form had been completed on a specific day, more than a month after the residents' admission, related to resident #001's missing glasses.

Review of resident #001's progress notes showed two notes related to the missing glasses. The first note was dated over a month after admission, documenting that the resident notified staff that their glasses were missing. The second note was written three days later, and documented that the glasses had been found and that the oncoming shift had been notified that the glasses needed to be labeled.



In an interview with the Business Office Manager #104, they said that the charge nurse was responsible for ensuring residents' items and clothing were labeled.

In an interview with one of the charge nurses, Registered Nurse #101, they shared that when a new resident was admitted, they were required to complete a form which identified all the residents belongings, and they were to ensure their items were labeled.

In an interview with Housekeeper #103, who also works in the laundry, they shared that the laundry staff did not label glasses, the staff up on the floor were to label them and that they had special stickers they were to use for glasses.

Review of the homes' policy titled Inventory of Non-Clothing Items, policy I.D:RCS M-15, last revised on June 8, 2018, directed that the Personal Support Worker labels non-clothing items by using the dymo tape. Glasses were to be labeled with correction tape.

In an interview with ADOC #100, they shared that the Resident's Personal Belongings List was incomplete, in that the glasses had not been documented as labeled. They said that the glasses should have been labeled upon admission. [s. 89. (1) (a) (ii)]

Issued on this 26th day of March, 2019

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

Original report signed by the inspector.