



**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**

**Long-Term Care Homes Division
Long-Term Care Inspections Branch**

**Division des foyers de soins de
longue durée
Inspection de soins de longue durée**

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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
Sep 1, 2017	2017_673554_0018	007341-17, 011714-17, 014107-17	Follow up

Licensee/Titulaire de permis

REVERA LONG TERM CARE INC.
5015 Spectrum Way Suite 600 MISSISSAUGA ON 000 000

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

BAY RIDGES
900 SANDY BEACH ROAD PICKERING ON L1W 1Z4

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

KELLY BURNS (554)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): August 01-04, and August 08-11, 2017

Intake #007341-17. During this inspection, Intakes #011714-17, and #014107-17 were inspected concurrently with the Follow-Up Inspection.

Summary of Intakes:

1) #007341-17 - Follow Up to Compliance Order #001, from Inspection Report #2017_591623_0002, specific to O. Reg. 79/10, s. 53 (4) - The licensee shall ensure



that for each resident demonstrating responsive behaviours, (a) behavioural triggers are identified, where possible; (b) strategies developed and implemented in response to these behaviours, where possible; and (c) actions taken in response to the needs of the resident, including assessments, reassessments, and interventions, and that the resident's responses to interventions are documented. Compliance due by, July 06, 2017.

2) #011714-17 - Critical Incident Report - alleged incident of resident to resident abuse;

3) #014107-17 - Critical Incident Report - alleged incident of resident to resident abuse.

An area of Non-Compliance, under LTCHA, 2007, s. 6 (7), was identified during this inspection, but will be issued within inspection report #2017_673554_0019, which was inspected concurrently with this inspection.

During the course of the inspection, the inspector(s) spoke with Executive Director, Interim Director of Care, Regional Director, Associate Director of Care, Resident Services Coordinator, Environmental Services Manager, Registered Nurses, Registered Practical Nurses, Personal Support Workers, Housekeeping Aide, family and residents.

During the course of the inspection, the inspector, toured the home, observed staff to resident interactions, resident to resident interactions, reviewed clinical health records, licensee's investigations related to associated CIRs, program evaluations for the 2016 Prevention of Abuse Program, and reviewed licensee policies, specifically, Resident Non-Abuse Program, Mandatory Reporting of Resident Abuse or Neglect, Investigation of Abuse or Neglect, and Dementia Care Program.

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

During the course of this inspection, Non-Compliances were not issued.

0 WN(s)

0 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)



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The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 53. (4)	CO #001	2017_591623_0002		554



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.

Issued on this 1st day of September, 2017

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

Original report signed by the inspector.