

**Inspection Report under  
the Long-Term Care  
Homes Act, 2007****Rapport d'inspection en vertu de  
la Loi de 2007 sur les foyers de  
soins de longue durée****Long-Term Care Operations Division  
Long-Term Care Inspections Branch****Division des opérations relatives aux  
soins de longue durée  
Inspection de soins de longue durée**Central West Service Area Office  
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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
May 10, 2021	2021_750539_0002	001112-21, 004372- 21, 006278-21	Complaint

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**Licensee/Titulaire de permis**Corporation of the County of Bruce  
30 Park Street Walkerton ON N0G 2V0**Long-Term Care Home/Foyer de soins de longue durée**Brucelea Haven Long Term Care Home - Corporation of the County of Bruce  
41 McGivern Street West P.O. Box 1600 Walkerton ON N0G 2V0**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs**

VALERIE GOLDRUP (539)

**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): April 9, 12, 14-16, 19-22, 2021.**

**The following intakes were completed in this complaint inspection:**

**Log #006278-21 and Log #001112-21 were related to complaints regarding staffing, the provision of care, and falls prevention and management.**

**Log #004372-21 was related to falls prevention and management.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Nursing (DON), Director of Care (DOC), Administrative Supervisor, Behavioural Supports Ontario/Registered Practical Nurse (BSO/ RPN) Lead, Registered Practical Nurses (RPNs), Personal Support Workers (PSWs), Housekeeping staff and Dietary staff.**

**During the course of the inspection, the inspector observed resident and staff interactions, and infection prevention and control practices. They reviewed the home's complaint logs, relevant policies and procedures, staff schedules, clinical health records and other pertinent documents.**

**The following Inspection Protocols were used during this inspection:**

**Falls Prevention  
Infection Prevention and Control  
Personal Support Services  
Reporting and Complaints  
Responsive Behaviours**

**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. 101. Dealing with complaints**

**Specifically failed to comply with the following:**

**s. 101. (2) The licensee shall ensure that a documented record is kept in the home that includes,**

**(a) the nature of each verbal or written complaint; O. Reg. 79/10, s. 101 (2).**

**(b) the date the complaint was received; O. Reg. 79/10, s. 101 (2).**

**(c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required; O. Reg. 79/10, s. 101 (2).**

**(d) the final resolution, if any; O. Reg. 79/10, s. 101 (2).**

**(e) every date on which any response was provided to the complainant and a description of the response; and O. Reg. 79/10, s. 101 (2).**

**(f) any response made in turn by the complainant. O. Reg. 79/10, s. 101 (2).**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that a documented record was kept in the home that includes:

- (a) the nature of each verbal or written complaint
- (b) the date the complaint was received
- (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required
- (d) the final resolution, if any
- (e) every date on which any response was provided to the complainant and a description of the response, and
- (f) any response made by the complainant.

The home received a verbal complaint concerning an injury sustained by a resident.

The home's Complaint Management Policy stated that a verbal complaint would be documented on a Complaint Record Form and logged on the secure Complaint Record File.

Registered staff said that family concerns would be documented in Point Click Care (PCC), and complaint forms completed, however, there was no written record of the verbal complaint on the home's Complaint Record Form. In addition there was no written description of the verbal complaint, the date it was received, the action the home took in regards to the complaint, the final resolution of the complaint, a description of the response to the complainant and the response made by the complainant.

The home failed to ensure a documented record of the complaint was kept in the home.

Source: registered staff, and DOC interview, DON internal emails, the home's complaint log, PCC notes, and the home's Complaint Management Policy #XXIII-A-10.40. [s. 101. (2)]

**Issued on this 17th day of May, 2021**

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

**Original report signed by the inspector.**