



**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
prévus le Loi de 2007 les
foyers de soins de longue**

Health System Accountability and Performance
Division
Performance Improvement and Compliance Branch

Division de la responsabilisation et de la
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Date(s) of Inspection/Date(s) de l'Inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jul 27, Aug 2, 9, 2011	2011_090172_0011	Critical Incident

Licensee/Titulaire de permis

CRAIGWIEL GARDENS
221 MAIN STREET, R. R. #1, AILSA CRAIG, ON, N0M-1A0

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

CRAIGHOLME
221 MAIN STREET, R. R. #1, AILSA CRAIG, ON, N0M-1A0

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

JOAN WOODLEY (172)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, 2 Registered Nurses, 1 Registered Practical Nurse, 2 Housekeeping/laundry Aides, 1 Health Care Aides, and 5 Personal Support Workers.

During the course of the inspection, the inspector(s) completed record and policy reviews, interviewed staff, observed care and completed walk about of the home.

The following Inspection Protocols were used in part or in whole during this inspection:

Admission Process

Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Definitions	Définitions
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 LTCHA, 2007 S.O. 2007, c.8, s. 20. Policy to promote zero tolerance
Specifically failed to comply with the following subsections:

- s. 20. (2) At a minimum, the policy to promote zero tolerance of abuse and neglect of residents,**
(a) shall provide that abuse and neglect are not to be tolerated;
(b) shall clearly set out what constitutes abuse and neglect;
(c) shall provide for a program, that complies with the regulations, for preventing abuse and neglect;
(d) shall contain an explanation of the duty under section 24 to make mandatory reports;
(e) shall contain procedures for investigating and responding to alleged, suspected or witnessed abuse and neglect of residents;
(f) shall set out the consequences for those who abuse or neglect residents;
(g) shall comply with any requirements respecting the matters provided for in clauses (a) through (f) that are provided for in the regulations; and
(h) shall deal with any additional matters as may be provided for in the regulations. 2007, c. 8, s. 20 (2).

Findings/Faits sayants :

1. Craigview Gardens' Resident Abuse Policy August 2010, revealed definitions that are not consistent with the definitions found in the LTCHA, 2007, S.O. 2007, c.8, s.20(2)(b).
2. Craigview Garden's Resident Abuse Policy, August 2010, revealed no program for preventing abuse and neglect. Item No.3 gives direction to "protect from risk of any further abuse by taking immediate action", but no reference to a program to prevent abuse and neglect initially. [LTCHA, 2007, S.O. 2007, c.8, s.20(2)(c)]
3. Craigview Gardens' Resident Abuse Policy, August 2010, revealed reference to the Long Term Care Facilities Program manual 0806-01 and indicates " the Ministry of Health will be notified of the incident of resident abuse or suspected resident abuse at the earliest possible time," as opposed to an explanation of the duty to make mandatory reports. [LTCHA, 2007, S.O. 2007, c.8, s.20(2)(d)]

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 be implemented voluntarily.

WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 78. Information for residents, etc.

Specifically failed to comply with the following subsections:

s. 78. (2) The package of information shall include, at a minimum,

- (a) the Residents' Bill of Rights;
- (b) the long-term care home's mission statement;
- (c) the long-term care home's policy to promote zero tolerance of abuse and neglect of residents;
- (d) an explanation of the duty under section 24 to make mandatory reports;
- (e) the long-term care home's procedure for initiating complaints to the licensee;
- (f) the written procedure, provided by the Director, for making complaints to the Director, together with the name and telephone number of the Director, or the name and telephone number of a person designated by the Director to receive complaints;
- (g) notification of the long-term care home's policy to minimize the restraining of residents and how a copy of the policy can be obtained;
- (h) the name and telephone number of the licensee;
- (i) a statement of the maximum amount that a resident can be charged under paragraph 1 or 2 of subsection 91 (1) for each type of accommodation offered in the long-term care home;
- (j) a statement of the reductions, available under the regulations, in the amount that qualified residents can be charged for each type of accommodation offered in the long-term care home;
- (k) information about what is paid for by funding under this Act or the Local Health System Integration Act, 2006 or the payments that residents make for accommodation and for which residents do not have to pay additional charges;
- (l) a list of what is available in the long-term care home for an extra charge, and the amount of the extra charge;
- (m) a statement that residents are not required to purchase care, services, programs or goods from the licensee and may purchase such things from other providers, subject to any restrictions by the licensee, under the regulations, with respect to the supply of drugs;
- (n) a disclosure of any non-arm's length relationships that exist between the licensee and other providers who may offer care, services, programs or goods to residents;
- (o) information about the Residents' Council, including any information that may be provided by the Residents' Council for inclusion in the package;
- (p) information about the Family Council, if any, including any information that may be provided by the Family Council for inclusion in the package, or, if there is no Family Council, any information provided for in the regulations;
- (q) an explanation of the protections afforded by section 26; and
- (r) any other information provided for in the regulations. 2007, c. 8, s. 78 (2)

Findings/Faits saignants :

1. The home's Admission package revealed no reference to the home's policy to minimize the restraining of residents and how to access a copy of the policy. Staff Interview with Administrator confirmed the home's policy on minimizing restraints of residents is not included in their Admission package. [LTCHA, 2007, S.O. 2007, c.8, s.78.(2)(g)]
2. The home's Admission package did not reveal a copy of the home's policy to promote zero tolerance of abuse and neglect of residents. Staff interview with Administrator confirmed the home's policy to promote zero tolerance of abuse and neglect of residents was not included in the admission package. [LTCHA, 2007, S.O. 2007, c.8, s.78.(2)(c)]
3. The home's Admission package revealed no explanation to the protection afforded by the Whistle-blower protection. [LTCHA, 2007, S.O. 2007, c.8, s.78.(2)(q)]

WN #3: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 79. Posting of Information

Specifically failed to comply with the following subsections:

s. 79. (1) Every licensee of a long-term care home shall ensure that the required information is posted in the home, in a conspicuous and easily accessible location in a manner that complies with the requirements, if any, established by the regulations. 2007, c. 8, s. 79. (1).

s. 79. (3) The required information for the purposes of subsections (1) and (2) is,

- (a) the Residents' Bill of Rights;
- (b) the long-term care home's mission statement;
- (c) the long-term care home's policy to promote zero tolerance of abuse and neglect of residents;
- (d) an explanation of the duty under section 24 to make mandatory reports;
- (e) the long-term care home's procedure for initiating complaints to the licensee;
- (f) the written procedure, provided by the Director, for making complaints to the Director, together with the name and telephone number of the Director, or the name and telephone number of a person designated by the Director to receive complaints;
- (g) notification of the long-term care home's policy to minimize the restraining of residents, and how a copy of the policy can be obtained;
- (h) the name and telephone number of the licensee;
- (i) an explanation of the measures to be taken in case of fire;
- (j) an explanation of evacuation procedures;
- (k) copies of the inspection reports from the past two years for the long-term care home;
- (l) orders made by an inspector or the Director with respect to the long-term care home that are in effect or that have been made in the last two years;
- (m) decisions of the Appeal Board or Divisional Court that were made under this Act with respect to the long-term care home within the past two years;
- (n) the most recent minutes of the Residents' Council meetings, with the consent of the Residents' Council;
- (o) the most recent minutes of the Family Council meetings, if any, with the consent of the Family Council;
- (p) an explanation of the protections afforded under section 26; and
- (q) any other information provided for in the regulations. 2007, c. 8, ss. 79 (3)

Findings/Faits sayants :

1. Observations made during Inspector's walk about revealed the address of the LSAO (London Service Area Office) was incorrect. The mandatory reporting to the Director has the incorrect Director's name.

Staff interview with Administrator confirmed she was unfamiliar with name of the acting Director. She also agreed the posted information and information contained in the admission package was outdated. [LTCHA, 2007, S.O. 2007, c.8, s.79.(3)(f)]

2. Observations made during Inspector's walk about did not reveal an explanation of whistle-blowing protections related to retaliation posted in the home, on July 27, 2011.

Staff interview with Administrator confirmed this information was not posted. [LTCHA, 2007, S.O. 2007, c.8, s.79.(3)(p)]

3. Observations made during Inspector's walk about did not reveal the policy to minimize the restraining of residents posted in the home on July 27, 2011.

Staff interview with Administrator confirmed this policy was not posted. [LTCHA, 2007, S.O. 2007, c.8, s.79.(3)(g)]

4. Observations made during Inspector's walk about revealed the policy to promote zero tolerance of abuse and neglect of residents was not posted in the home on July 27, 2011.

Staff interview with Administrator confirmed this policy was not posted. [LTCHA, 2007, S.O. 2007, c.8, s.79.(3)(c)]

WN #4: The Licensee has failed to comply with O.Reg 79/10, s. 96. Policy to promote zero tolerance

Every licensee of a long-term care home shall ensure that the licensee's written policy under section 20 of the Act to promote zero tolerance of abuse and neglect of residents,

- (a) contains procedures and interventions to assist and support residents who have been abused or neglected or allegedly abused or neglected;
- (b) contains procedures and interventions to deal with persons who have abused or neglected or allegedly abused or neglected residents, as appropriate;
- (c) identifies measures and strategies to prevent abuse and neglect;
- (d) identifies the manner in which allegations of abuse and neglect will be investigated, including who will undertake the investigation and who will be informed of the investigation; and
- (e) identifies the training and retraining requirements for all staff, including,
 - (i) training on the relationship between power imbalances between staff and residents and the potential for abuse and neglect by those in a position of trust, power and responsibility for resident care, and
 - (ii) situations that may lead to abuse and neglect and how to avoid such situations. O. Reg. 79/10, s. 96.

Findings/Faits sayants :

- 1. Craigview Gardens' Resident Abuse Policy does not reveal any reference to a program for the prevention of abuse and neglect. Item No. 3 gives direction to "protect from risk of any further abuse by taking immediate action," but no reference to a program that prevents abuse to begin with. [O.Reg.79/10, s.96.(c)]
- 2. Craigview Gardens' Resident Abuse Policy did not reveal any reference to a program to assist and support residents who have been abused or neglected or allegedly abuse or neglected. [O.Reg. 79/10, s.96.(a)]

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 be implemented voluntarily.

WN #5: The Licensee has failed to comply with O.Reg 79/10, s. 225. Posting of information

Specifically failed to comply with the following subsections:

s. 225. (1) For the purposes of clause 79 (3) (q) of the Act, every licensee of a long-term care home shall ensure that the information required to be posted in the home and communicated to residents under section 79 of the Act includes the following:

- 1. The fundamental principle set out in section 1 of the Act.
- 2. The home's licence or approval, including any conditions or amendments, other than conditions that are imposed under the regulations or the conditions under subsection 101 (3) of the Act.
- 3. The most recent audited report provided for in clause 243 (1) (a).
- 4. The Ministry's toll-free telephone number for making complaints about homes and its hours of service.
- 5. Together with the explanation required under clause 79 (3) (d) of the Act, the name and contact information of the Director to whom a mandatory report shall be made under section 24 of the Act. O. Reg. 79/10, s. 225 (1).

Findings/Faits sayants :

- 1. Observations made during inspector's walk about revealed no posting of Section 1 of Long-Term Care Act anywhere in the home on July 27, 2011.
- 2. Staff Interview with Administrator confirmed she was unaware of the need for this to be posted. [O.Reg. 79/10, s. 225(1)]

Issued on this 11th day of August, 2011



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Jan L. Woodley