

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

Rapport d'inspection prévue le *Loi de 2007 les foyers de soins de longue durée* 

# Ministry of Health and Long-Term Care

Health System Accountability and Performance Division Performance Improvement and Compliance Branch

# Ministère de la Santé et des Soins de longue durée

Division de la responsabilisation et de la performance du système de santé

Direction de l'amélioration de la performance et de la conformité

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	Licensee Copy/Copie du Ti	tulaire Public Copy/Copie Public		
Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection Complaint		
October 21, 2010	2010_157_2503_30Sep14515			
Licensee/Titulaire Deloitte & Touche Inc., 181 Bay Street, Brookfield Place, Suite 1400, Toronto, ON M5J 2V1 Fax (416)601-6690				
Long-Term Care Home/Foyer de soins de longue durée Craiglee Nursing Home, 102 Craiglee Drive, Scarborough, ON M1N 2M7 Fax (416)267-8176				
Name of Inspector(s)/Nom de l'inspecteur(s	5)	•		
Pat Powers, #157				
Inspection Summary/Sommaire d'inspection				
The purpose of this inspection was to con-	duct a complaint inspection r	elated to the care of a resident.		
During the course of the inspection, the inspector spoke with the resident, the Administrator, the Director of Care, the home's Social Worker.				
During the course of the inspection, the inspector observed the resident's clinical health record.				
The following Inspection Protocols were used during this inspection: Dignity, Choice and Privacy				
Findings of Non-Compliance were found of	during this inspection. The fo	ollowing action was taken:		
1 WN 1 CO #001				
		•		



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# NON- COMPLIANCE / (Non-respectés)

#### Definitions/Définitions

WN - Written Notifications/Avis écrit

VPC - Voluntary Plan of Correction/Plan de redressement volontaire

DR – Director Referral/Régisseur envoyéCO – Compliance Order/Ordres de conformité

WAO - Work and Activity Order/Ordres : travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de « exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

**WN #1:** The Licensee has failed to comply with O.Reg. 79/10, s.3(1)Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

11. Every resident has the right to,

ii. give or refuse consent to any treatment, care or service for which his or her consent is required by law and to be informed of the consequences of giving or refusing consent

## Findings:

- 1. The home's "Restraint Consent or Refusal" form was completed for a resident certifying that the resident's Substitute Decision Maker was informed and understood the restraint policy and procedure, consenting to the use of a wanderguard as a physical restraint. The consent is not signed but states "verbal consent obtained."
- 2. The resident is competent to make her own decisions regarding her care and services and the wanderguard was applied without her consent.

CO # 001 will be served on the licensee. Refer to the "Order(s) of the Inspector" form.

Inspector ID #:

157

Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné	Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.
Title: Date:	Date of Report: (if different from date(s) of inspection).



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# Order(s) of the Inspector

Pursuant to section 153 and/or section 154 of the Long-Term Care Homes Act, 2007, S.O. 2007, c.8

	Licensee Copy/Copie du Titulaire	Public Copy/Copie Public		
Name of Inspector:	Pat Powers	Inspector ID # 157		
Log #:	O-002138			
Inspection Report #:	2010_157_2503_30Sep145152			
Type of Inspection:	Complaint			
Date of Inspection:	October 21, 2010			
Licensee:	Deloitte & Touche Inc. Attention: Hartley Bricks 181 Bay Street, Brookfield Place, Suite 1400, Toronto, ON M5J 2V1 Fax (416)601-6690			
LTC Home:	Craiglee Nursing Home 102 Craiglee Drive Scarborough, ON M1N 2M7 Fax (416)267-8176			
Name of Administrator:	Angie Heinz			

To Deloitte & Touche Inc., you are hereby required to comply with the following order by the date set out below:

		Compliance Order, Section 153(1)(a)		
Pursuant to Ontario Regulation 79/10, s.3(1) Every licensee of a long-term care home shall ensure that				
the following rights of residents are fully respected and promoted:				
11. Every resident has the right to,				
ii. give or refuse consent to any treatment, care or service for which his or her consent is required				
by law and to be informed of the cor	nsequences of gi	ving or refusing consent		
<b>Order:</b> The licensee must provide e consent to the use of a wanderguard	every resident or	his or her legal representative, the right to refuse or		



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## Grounds:

A wanderguard was applied to an identified resident without the resident's consent.

This order must be complied with by:

**Immediate** 

## REVIEW/APPEAL INFORMATION

#### TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this(these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for service for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:.

### Director

c/o Appeals Clerk
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
55 St. Clair Ave. West
Suite 800, 8<sup>th</sup> floor
Toronto, ON M4V 2Y2
Fax: 416-327-7603

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent group of members not connected with the Ministry. They are appointed by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, with 28 days of being served with the notice of the Director's decision, mail or deliver a written notice of appeal to both:

Health Services Appeal and Review Board and the Attention Registrar 151 Bloor Street West 9th Floor Toronto, ON M5S 2T5

#### Director

c/o Appeals Clerk
Performance Improvement and Compliance Branch
55 St. Claire Avenue, West
Suite 800, 8<sup>th</sup> Floor
Toronto, ON M4V 2Y2

Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.



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Issued on this 05 day of November , 2010.		
Signature of Inspector:	Palura a Lhous	
Name of Inspector:	Pat Powers	
Service Area Office:	Ottawa Service Area Office	