

Ministry of Long-Term Care

Long-Term Care Operations Division
Long-Term Care Inspections Branch

Central West District

609 Kumpf Drive, Suite 105
Waterloo, ON, N2V 1K8
Telephone: (888) 432-7901

Original Public Report

Report Issue Date: Sept 25, 2023

Inspection Number: 2023-1053-0004

Inspection Type:

Complaint

Licensee: Derbecker's Heritage House Limited

Long Term Care Home and City: Derbecker's Heritage House, St Jacobs

Lead Inspector

Kaitlyn Puklicz (000685)

Inspector Digital Signature

Additional Inspector(s)

Jessica Bertrand (#722374) & Jeffrey Letson were present for this inspection

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): September 11-13, 15, 19, 2023

The following intake(s) were inspected:

- Intake: #00094627 - Complaint alleging improper transfer of a resident resulting in injuries
- Intake: #00094769 - Complaint alleging improper discharge of a resident

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

Resident Care and Support Services
Infection Prevention and Control
Admission, Absences and Discharge

INSPECTION RESULTS

WRITTEN NOTIFICATION: Reporting certain matters to Director

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 28 (1) 1.

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Introduction

The licensee has failed to ensure that two incidents of incompetent care of a resident were immediately reported to the Director.

Rationale and Summary

A complaint was received stating that a resident had been injured twice during staff-assisted transfers.

There were no Critical Incident Reports (CIR) submitted to the Director regarding either of these incidents.

The home's failure to report to the Director could have delayed the Director's ability to respond to the incident.

Sources:

Clinical record for resident

[000685]

WRITTEN NOTIFICATION: Transferring and Positioning Techniques

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 40

Introduction

The licensee has failed to ensure that a resident was provided safe positioning during transfers with a mechanical lift.

Rationale and Summary

On two separate occasions, the resident was being assisted by two staff members to transfer with a mechanical lift but experienced an injury during the transfer due to the improper positioning of their body.

Failing to provide safe positioning and proper transferring techniques led to pain and injury of the resident.

Sources:

Clinical record for resident

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[000685]

**COMPLIANCE ORDER CO #001 Requirements on licensee before
discharging a resident**

NC #003 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 161 (2) (b)

The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:

The licensee shall:

- a) Update the home's discharge-related policies to include that a long-stay resident cannot be discharged without collaborating with the placement coordinator and other health service organizations to make alternative arrangements for accommodation, care and a secure environment required by the resident, as outlined in O. Reg. 246/22, section 161 (2) (b).
- b) Ensure that all staff in management positions at the home, as well as the physicians, review O. Reg. 246/22, sections 156 -158, 160-161, related to discharge of a resident. The home will keep documentation to support that the review was completed by each team member, including the name, date and position of the team member.

Grounds

Introduction

Non-compliance with O. Reg. 246/22, s. 161 (2) (b).

The licensee has failed to ensure that a resident had alternative arrangements made for accommodation, care and a secure environment prior to discharging the resident from the home.

Rationale and Summary

A resident was admitted to hospital and later discharged from Derbecker's Heritage House. The home did not ensure that alternative arrangements were made for accommodation, care, and a secure environment as required, prior to discharging the resident.

Sources:

Clinical record for resident, discussion with the complainant, GRH and HCCSS staff, documentation from the home regarding the resident's discharge.



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**Inspection Report Under the
Fixing Long-Term Care Act, 2021**

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[000685]

This order must be complied with by November 3, 2023

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REVIEW/APPEAL INFORMATION

TAKE NOTICE

The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). 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 or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP 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, email or commercial courier upon:

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

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If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

Health Services Appeal and Review Board

Attention Registrar
151 Bloor Street West, 9th Floor
Toronto, ON, M5S 1S4

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th Floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

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