

**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**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Apr 6, 2022	2022_876606_0007	001601-22	Complaint

Licensee/Titulaire de permis

Corporation of the County of Dufferin
151 Centre Street Shelburne ON L9V 3R7

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

Dufferin Oaks
151 Centre Street Shelburne ON L9V 3R7

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

JANET GROUX (606)

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): February 28, March 1-4, 8, 9 and 11, 2022.

**The following intake was completed in this complaint inspection:
Log #001601-22 regarding the residents bill of rights.**

**Note: This inspection was done concurrently with Critical Incident System
inspection #2022_876606_0008.**

**During the course of the inspection, the inspector(s) spoke with the Administrator,
Director of Care (DOC), Social Worker (SW), Recreation Aide (RA), Registered
Practical Nurses (RPN), Registered Nurses (RN), Personal Support Workers (PSW),
and residents.**

**During the course of the inspection, the inspectors observed resident and staff
interactions, reviewed clinical health records, and other pertinent documents.**

**The following Inspection Protocols were used during this inspection:
Dignity, Choice and Privacy**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

1 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 LTCHA, 2007 S.O. 2007, c.8, s. 3. Residents' Bill of Rights

Specifically failed to comply with the following:

s. 3. (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

14. Every resident has the right to communicate in confidence, receive visitors of his or her choice and consult in private with any person without interference. 2007, c. 8, s. 3 (1).

Findings/Faits saillants :

The licensee failed to ensure a resident's right to receive visitors of their choice was fully promoted and respected.

A resident was prevented from having any contact with a relative.

Three staff members who spoke to the resident said the resident responded in a positive manner when the resident's relative name was mentioned. One staff member said the resident was disappointed when they were told they would not be able to see them.

Failure for the resident to receive a visit from their relative had a negative effect on the resident and may cause further negative effects to their emotional and well being.

Sources: complaint submitted to the MLTC, observations of the resident, clinical records, and interviews with the resident and staff. [s. 3. (1) 14.]

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 ensure resident #001's right to receive visitors of their choice is fully promoted and respected, to be implemented voluntarily.

Issued on this 13th day of April, 2022

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

Original report signed by the inspector.