



**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 sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**

**Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée**

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## **Public Copy/Copie du public**

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<b>Report Date(s) / Date(s) du rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
May 18, 2017	2017_552531_0015	007668-17	Resident Quality Inspection

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### **Licensee/Titulaire de permis**

KEAY NURSING HOMES INC

10-112 Red Pine Road P.O. Box 21 GRAND BEND ON N0M 1Z0

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

E. J. MCQUIGGE LODGE

38 Black Diamond Road P.O. Box 68 Cannifton ON K0K 1K0

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

SUSAN DONNAN (531), CATHI KERR (641), HEATH HEFFERNAN (622), WENDY BROWN (602)

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## **Inspection Summary/Résumé de l'inspection**



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**The purpose of this inspection was to conduct a Resident Quality Inspection inspection.**

**This inspection was conducted on the following date(s): May 8, 9, 10, 11, 12, 15, 16, 17 and 18, 2017.**

**The following logs were inspected concurrently during this inspection:**

**Log # 007212-17 related to falls**

**Log # 001687-17 related to alleged abuse**

**During the course of the inspection, the inspector(s) spoke with residents, residents Substitute Decision Makers (SDM), Personal Support Workers, Registered Practical Nurses (RPN), Registered Nurses (RN), Houskeeping Aide (HK), the RAI coordinator, the Activity Program Director, Environmental Services Manager (ESM), the Equipment Vendor, the Office Assistant (OA) the Director of Care (DOC) and the Administrator.**

**During the course of the inspection the inspectors conducted a tour of the home, reviewed resident health care records, observed resident care and services, reviewed medication administration and practices, reviewed resident council minutes, reviewed equipment inspection documentation and applicable home policies and procedures, as well as the home's complaint record and staffing plans.**

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



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**Accommodation Services - Laundry  
Contenance Care and Bowel Management  
Critical Incident Response  
Dining Observation  
Family Council  
Hospitalization and Change in Condition  
Infection Prevention and Control  
Medication  
Nutrition and Hydration  
Personal Support Services  
Prevention of Abuse, Neglect and Retaliation  
Reporting and Complaints  
Residents' Council  
Responsive Behaviours  
Skin and Wound Care**

**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>Legendé</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>

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**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 22. Licensee to forward complaints**

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

**s. 22. (1) Every licensee of a long-term care home who receives a written complaint concerning the care of a resident or the operation of the long-term care home shall immediately forward it to the Director. 2007, c. 8, s. 22 (1).**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that any written complaints that were received concerning the care of a resident or the operation of the home, were immediately forwarded to the Director.

In reference to log # 001687-17

On a specified date the complainant contacted the Ministry of Health and Long Term to indicate that a written a letter of complaint was submitted to the Administrator. The complainant alleged resident #014 was threatened and humiliated by the tone of voice of HK #114.

A review of the homes complaint log documentation indicated that on a particular date the letter of complaint related the alleged staff to resident abuse and missing personal items for resident #014 was received by the home's Administrator . Documentation indicated the home investigated and resolved the complaint; however the Director was not notified.

During an interview with inspector #622, May 16, 2017, the Administrator indicated that she received a letter of complaint related to alleged staff to resident abuse and missing personal items for resident #014 on the specified date. The Administrator indicated the complaint was immediately investigated by the home and a plan was developed as a follow up. The Administrator also indicated that the complainant and the power of attorney were notified of the investigation results. The Administrator further stated that according to legislation she should have reported the complaint to the Director. [s. 22. (1)]



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**Issued on this 19th day of May, 2017**

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

**Original report signed by the inspector.**