

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 prévue 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 performance du système de santé Direction de l'amélioration de la performance et de la conformité

Hamilton Service Area Office 119 King Street West, 11th Floor HAMILTON, ON, L8P-4Y7 Telephone: (905) 546-8294 Facsimile: (905) 546-8255

Bureau régional de services de Hamilton 119, rue King Ouest, 11iém étage HAMILTON, ON, L8P-4Y7 Téléphone: (905) 546-8294 Télécopieur: (905) 546-8255

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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
Oct 19, Nov 15, 19, 2012	2012_090172_0064	Other
Licensee/Titulaire de permis		
THE ELLIOTT GROUP  170 Metcalfe Street, GUELPH, ON, N  Long-Term Care Home/Foyer de so		
THE ELLIOTT COMMUNITY  170 METCALFE STREET, GUELPH,	ON, N1E-4Y3	
Name of Inspector(s)/Nom de l'insp	ecteur ou des inspecteurs	
JOAN WOODLEY (172)		
	nspection Summary/Résumé de l'insp	ection

The purpose of this inspection was to conduct an Other inspection.

During the course of the inspection, the inspector(s) spoke with the Chief Executive Officer, the Director of Care, the Quality Improvement Coordinator, Director of Environmental Services, Director of Finances, Director of Dietary Services, the Associate Director of Care, 1 Registered Practical Nurse, 2 Personal Support Workers, and 1 Dietary Aide.

During the course of the inspection, the inspector(s) completed a walk through of the home, made observations, and reviewed relevant documents.

This inspection is a Service Area Office Initiated Inspection.

The following Inspection Protocols were used during this inspection:

**Accommodation Services - Maintenance** 

**Admission Process** 

**Dining Observation** 

Infection Prevention and Control

Residents' Council



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Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES		
Legend	Legendé	
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	
Homes Act, 2007 (LTCHA) was found. (A requirement under the LTCHA includes the requirements contained in the items listed in	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. 15. Accommodation services Specifically failed to comply with the following subsections:

- s. 15. (2) Every licensee of a long-term care home shall ensure that,
- (a) the home, furnishings and equipment are kept clean and sanitary;
- (b) each resident's linen and personal clothing is collected, sorted, cleaned and delivered; and
- (c) the home, furnishings and equipment are maintained in a safe condition and in a good state of repair. 2007, c. 8, s. 15 (2).

## Findings/Faits saillants:

- 1. Observations made during the initial walk through of the home revealed:
- a) areas of the floor covering were missing in the elevator
- b) a storage area had a hole in the wall.

Staff interviews with the Director of Care and the Manager of Environmental Services revealed:

- a) they were aware of the flooring repair needs in the elevator
- b) they were not aware of the hole in the wall.

[LTCHA, 2007, S.O., C.8, s.15(2)(c)]

WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 56. Residents' Council Specifically failed to comply with the following subsections:

s. 56. (2) Only residents of the long-term care home may be a member of the Residents' Council. 2007, c. 8, s. 56 (2)

## Findings/Faits saillants:

1. Staff interview with the Director of Care revealed that at this time there is no resident or residents interested in chairing or co-chairing the Residents' Council. The residents have asked the home to have the Director of Programs to be the chair. The home is aware of the requirement for all members of the residents' council to be residents. On an ongoing basis the home attempts to get new or long term residents to take a lead role with the council. [LTCHA, 2007, S.O.,C.8,s.56.(2)]



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WN #3: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 85. Satisfaction survey Specifically failed to comply with the following subsections:

s. 85. (3) The licensee shall seek the advice of the Residents' Council and the Family Council, if any, in developing and carrying out the survey, and in acting on its results. 2007, c. 8, s. 85. (3).

## Findings/Faits saillants:

1. Staff interview with Director of Care revealed the home does not seek the advice of the Residents' Council in developing and carrying out the satisfaction survey. [LTCHA, 2007, S.O.,C.8,s.85.(3)]

Issued on this 19th day of November, 2012

Jean A. Thalley . Rol

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