



**Ministry of Health and
Long-Term Care**

**Ministère de la Santé et des
Soins de longue durée**

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

**Rapport d'inspection sous la
Loi de 2007 sur les foyers de
soins de longue durée**

**Health System Accountability and
Performance Division
Performance Improvement and
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**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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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Dec 18, 2013	2013_181105_0062	L-000963-13	Other

Licensee/Titulaire de permis

THE ELLIOTT GROUP
170 Metcalfe Street, GUELPH, ON, N1E-4Y3

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

THE ELLIOTT COMMUNITY
170 METCALFE STREET, GUELPH, ON, N1E-4Y3

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

JUNE OSBORN (105)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): December 17, 2013

This is a Service Area Office Initiated Inspection.

During the course of the inspection, the inspector(s) spoke with 2 Residents, 1 Family Member, 2 Personal Support Workers, 2 Dietary Aides, 2 Housekeeping Aides, 1 Registered Practical Nurse, the Recreation Director, the Environmental Services Director, and the Director of Care.

During the course of the inspection, the inspector(s) toured the home, observed interactions between staff and residents, and observed meal service.

The following Inspection Protocols were used during this inspection:

Dining Observation

Residents' Council

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend

**WN – Written Notification
VPC – Voluntary Plan of Correction
DR – Director Referral
CO – Compliance Order
WAO – Work and Activity Order**

Legendé

**WN – Avis écrit
VPC – Plan de redressement volontaire
DR – Aiguillage au directeur
CO – Ordre de conformité
WAO – Ordres : travaux et activités**



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.)

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

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.

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. 57. Powers of Residents' Council

Specifically failed to comply with the following:

s. 57. (2) If the Residents' Council has advised the licensee of concerns or recommendations under either paragraph 6 or 8 of subsection (1), the licensee shall, within 10 days of receiving the advice, respond to the Residents' Council in writing. 2007, c. 8, s. 57.(2).

Findings/Faits saillants :

1. The licensee has failed to respond in writing within 10 days of receiving Residents' Council advice related to concerns.

The Resident Council Assistant (Recreation Director), shared that when Residents' Council present a concern, the concern is given to the Director of the department in question and the department Director attends the next Council meeting to address it. [s. 57. (2)]

WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 85. Satisfaction survey



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Specifically failed to comply with the following:

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. The licensee does not seek the advice of Residents' Council in developing and carrying out the satisfaction survey, and in acting on its results.
The Resident Council Assistant(Recreation Manager), shared that the Council does not have input into the satisfaction survey, or acting on the results of the Survey. [s. 85. (3)]

Issued on this 18th day of December, 2013

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

JUNE OSBORN