



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

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

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**  
**Division des foyers de soins de  
longue durée**  
**Inspection de soins de longue durée**

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

**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**

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

**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du apport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Jan 2, 2018	2017_689586_0017	010209-17	Follow up

**Licensee/Titulaire de permis**

UNGER NURSING HOMES LIMITED  
312 Queenston Street St. Catharines ON L2P 2X4

**Long-Term Care Home/Foyer de soins de longue durée**  
HAMPTON TERRACE CARE CENTRE  
75 PLAINS ROAD WEST BURLINGTON ON L7T 1E8

**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs**  
JESSICA PALADINO (586)

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



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**The purpose of this inspection was to conduct a Follow up inspection.**

**This inspection was conducted on the following date(s): December 22, 2017.**

**The inspection was completed on Follow Up Intake #010209-17.**

**During the course of the inspection, the inspector(s) spoke with the Director of Resident Care (DORC), Quality Indicator (QI) Co-ordinator, registered and non-registered staff, and residents.**

**During the course of the inspection, the inspector toured the home, observed restraints, reviewed staff training records, audits and resident plans of care, and spoke with residents and staff.**

**The following Inspection Protocols were used during this inspection:  
Minimizing of Restraining**

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

**1 WN(s)  
0 VPC(s)  
1 CO(s)  
0 DR(s)  
0 WAO(s)**



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**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).

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 O.Reg 79/10, s. 110. Requirements relating to restraining by a physical device**

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

**s. 110. (1) Every licensee of a long-term care home shall ensure that the following requirements are met with respect to the restraining of a resident by a physical device under section 31 or section 36 of the Act:**

**1. Staff apply the physical device in accordance with any manufacturer's instructions. O. Reg. 79/10, s. 110 (1).**

**Findings/Faits saillants :**



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1. The licensee failed to ensure that staff applied the physical restraint device in accordance with any manufacturer's instructions.

The DORC provided the Long Term Care Homes (LTCH) Inspector with the Rexall Drugs Instructions for fastening specific types of restraints, which included detail on the appropriate application.

A. During the inspection, resident #024 was observed with a restraint inappropriately applied. Review of the plan of care identified they required the restraint. Interview and observation of the restraint with RPN #100 confirmed that the restraint was not applied correctly according to the manufacturer's instructions and the staff member adjusted the restraint accordingly.

B. During the inspection, resident #010 was observed with a restraint inappropriately applied. Review of the plan of care identified they required the restraint. In an interview with PSW's #201 and #202, they indicated that the resident could remove the restraint on their own at times, but was not able to adjust how it was applied. The DOC confirmed that the resident could not remove the restraint on command. Interview and observation of the restraint with RPN #100 confirmed that the restraint was not applied correctly according to the manufacturer's instructions and the staff member adjusted the restraint accordingly.

C. During the inspection, resident #020 was observed with a restraint inappropriately applied. Review of the plan of care identified they required the restraint. Interview and observation of the restraint with RPN #100 confirmed that the restraint was not applied correctly according to the manufacturer's instructions and the staff member adjusted the restraint accordingly. [s. 110. (1) 1.]

***Additional Required Actions:***

***CO # - 001 will be served on the licensee. Refer to the “Order(s) of the Inspector”.***

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**Issued on this 30th day of January, 2018**

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

**Original report signed by the inspector.**



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

**Order(s) of the Inspector**

Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
Homes Act, 2007*, S.O. 2007, c.8

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

**Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou  
de l'article 154 de la *Loi de 2007 sur les foyers  
de soins de longue durée*, L.O. 2007, chap. 8

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

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

**Public Copy/Copie du public**

**Name of Inspector (ID #) /**

**Nom de l'inspecteur (No) :** JESSICA PALADINO (586)

**Inspection No. /**

**No de l'inspection :** 2017\_689586\_0017

**Log No. /**

**No de registre :** 010209-17

**Type of Inspection /**

**Genre d'inspection:** Follow up

**Report Date(s) /**

**Date(s) du Rapport :** Jan 2, 2018

**Licensee /**

**Titulaire de permis :** UNGER NURSING HOMES LIMITED

312 Queenston Street, St. Catharines, ON, L2P-2X4

**LTC Home /**

**Foyer de SLD :**

HAMPTON TERRACE CARE CENTRE

75 PLAINS ROAD WEST, BURLINGTON, ON, L7T-1E8

**Name of Administrator /**

**Nom de l'administratrice**

**ou de l'administrateur :** Karen Verhaeghe

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To UNGER NURSING HOMES LIMITED, you are hereby required to comply with the following order(s) by the date(s) set out below:



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

**Order(s) of the Inspector**

Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
Homes Act, 2007*, S.O. 2007, c.8

**Ministère de la Santé et  
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**Ordre(s) de l'inspecteur**

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**Order # /**

**Ordre no :** 001

**Order Type /**

**Genre d'ordre :** Compliance Orders, s. 153. (1) (a)

**Linked to Existing Order /**

**Lien vers ordre existant:** 2017\_573581\_0005, CO #001;

**Pursuant to / Aux termes de :**

O.Reg 79/10, s. 110. (1) Every licensee of a long-term care home shall ensure that the following requirements are met with respect to the restraining of a resident by a physical device under section 31 or section 36 of the Act:

1. Staff apply the physical device in accordance with any manufacturer's instructions.
2. The physical device is well maintained.
3. The physical device is not altered except for routine adjustments in accordance with any manufacturer's instructions. O. Reg. 79/10, s. 110 (1).

**Order / Ordre :**

The licensee shall ensure that residents #010, #020 and #024 and all other residents using restraints have their restraints applied according to manufacturer's instructions.

Ensure that restraints are audited at a frequency that ensures staff are applying the restraints according to manufacturer's instructions. Where discrepancies are identified, one-to-one training of responsible staff is completed and the training is documented.

**Grounds / Motifs :**



**Ministry of Health and  
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**Ministère de la Santé et  
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**Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

1. The Order is made based upon the application of the factors of severity (2), scope (3) and compliance history (4), in keeping with s.299 (1) of the Regulation, in respect of the potential for harm toward resident #010, #020 and #024, the scope of a widespread issue, and the Licensee's history of non-compliance (VPC) on the February 2016 Resident Quality Inspection (RQI), and (CO) on the April 2017, RQI with the s. 110 related to the use of restraints.

The licensee failed to ensure that staff applied the physical restraint device in accordance with any manufacturer's instructions.

The DORC provided the Long Term Care Homes (LTCH) Inspector with the Rexall Drugs Instructions for fastening specific types of restraints, which included detail on the appropriate application.

A. During the inspection, resident #024 was observed with a restraint inappropriately applied. Review of the plan of care identified they required the restraint. Interview and observation of the restraint with RPN #100 confirmed that the restraint was not applied correctly according to the manufacturer's instructions and the staff member adjusted the restraint accordingly.

B. During the inspection, resident #010 was observed with a restraint inappropriately applied. Review of the plan of care identified they required the restraint. In an interview with PSW's #201 and #202, they indicated that the resident could remove the restraint on their own at times, but was not able to adjust the how it was applied. The DOC confirmed that the resident could not remove the restraint on command. Interview and observation of the restraint with RPN #100 confirmed that the restraint was not applied correctly according to the manufacturer's instructions and the staff member adjusted the restraint accordingly.

C. During the inspection, resident #020 was observed with a restraint inappropriately applied. Review of the plan of care identified they required the restraint. Interview and observation of the restraint with RPN #100 confirmed that the restraint was not applied correctly according to the manufacturer's instructions and the staff member adjusted the restraint accordingly. (586)



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**Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou  
de l'article 154 de la *Loi de 2007 sur les foyers  
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**This order must be complied with by /  
Vous devez vous conformer à cet ordre d'ici le :**

Mar 30, 2018



**Ministry of Health and  
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Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
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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 to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

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 was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail, commercial courier or by fax upon:

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Health and Long-Term Care  
1075 Bay Street, 11th Floor  
TORONTO, ON  
M5S-2B1  
Fax: 416-327-7603



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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing, when service is made by a commercial courier it is deemed to be made on the second business day after the day the courier receives the document, and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this (these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The 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 a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the Director

Attention Registrar  
151 Bloor Street West  
9th Floor  
Toronto, ON M5S 2T5

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Health and Long-Term Care  
1075 Bay Street, 11th Floor  
TORONTO, ON  
M5S-2B1  
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website [www.hsarb.on.ca](http://www.hsarb.on.ca).



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## **RENSEIGNEMENTS RELATIFS AUX RÉEXAMENS DE DÉCISION ET AUX APPELS**

### **PRENEZ AVIS :**

Le/la titulaire de permis a le droit de faire une demande de réexamen par le directeur de cet ordre ou de ces ordres, et de demander que le directeur suspende cet ordre ou ces ordres conformément à l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée.

La demande au directeur doit être présentée par écrit et signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au/à la titulaire de permis.

La demande écrite doit comporter ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le/la titulaire de permis souhaite que le directeur examine;
- c) l'adresse du/de la titulaire de permis aux fins de signification.

La demande de réexamen présentée par écrit doit être signifiée en personne, par courrier recommandé, par messagerie commerciale ou par télécopieur, au :

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 416 327-7603

Quand la signification est faite par courrier recommandé, elle est réputée être faite le cinquième jour qui suit le jour de l'envoi, quand la signification est faite par messagerie commerciale, elle est réputée être faite le deuxième jour ouvrable après le jour où la messagerie reçoit le document, et lorsque la signification est faite par télécopieur, elle est réputée être faite le premier jour ouvrable qui suit le jour de l'envoi de la télécopie. Si un avis écrit de la décision du directeur n'est pas signifié au/à la titulaire de permis dans les 28 jours de la réception de la demande de réexamen présentée par le/la titulaire de permis, cet ordre ou ces ordres sont réputés être confirmés par le directeur, et le/la titulaire de permis est réputé(e) avoir reçu une copie de la décision en question à l'expiration de ce délai.



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Le/la titulaire de permis a le droit d'interjeter appel devant la Commission d'appel et de révision des services de santé (CARSS) de la décision du directeur relative à une demande de réexamen d'un ordre ou des ordres d'un inspecteur ou d'une inspectrice conformément à l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée. La CARSS est un tribunal autonome qui n'a pas de lien avec le ministère. Elle est créée par la loi pour examiner les questions relatives aux services de santé. Si le/la titulaire décide de faire une demande d'audience, il ou elle doit, dans les 28 jours de la signification de l'avis de la décision du directeur, donner par écrit un avis d'appel à la fois à :

la Commission d'appel et de révision des services de santé et au directeur

À l'attention du/de la registrateur(e)  
151, rue Bloor Ouest, 9e étage  
Toronto ON M5S 2T5

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière  
d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 416 327-7603

À la réception de votre avis d'appel, la CARSS en accusera réception et fournira des instructions relatives au processus d'appel. Le/la titulaire de permis peut en savoir davantage sur la CARSS sur le site Web [www.hsarbo.ca](http://www.hsarbo.ca).

**Issued on this 2nd day of January, 2018**

**Signature of Inspector /  
Signature de l'inspecteur :**

**Name of Inspector /  
Nom de l'inspecteur :** Jessica Paladino

**Service Area Office /  
Bureau régional de services :** Hamilton Service Area Office