

**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
Jan 24, 2020	2020_626501_0002	019614-19	Complaint

Licensee/Titulaire de permis

Regional Municipality of Durham
605 Rossland Road East WHITBY ON L1N 6A3

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

Hillsdale Estates
590 Oshawa Blvd. North OSHAWA ON L1G 5T9

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

SUSAN SEMEREDY (501)

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): January 15, 16, 17, 20 and 21, 2020.

This inspection occurred concurrently with critical incident inspection #2020_626501_0001.

**The following intake was inspected during this inspection:
One intake related to a denial of admission to the home**

During the course of the inspection, the inspector(s) spoke with the Director of Care and Central East Local Integration Health Network (CELHIN) placement care coordinator.

The inspector reviewed letters sent to applicants related to withholding approval of admission and admission health documents available to the homes from the CELHIN.

**The following Inspection Protocols were used during this inspection:
Admission and Discharge**

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>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. 44. Authorization for admission to a home

Specifically failed to comply with the following:

s. 44. (7) The appropriate placement co-ordinator shall give the licensee of each selected home copies of the assessments and information that were required to have been taken into account, under subsection 43 (6), and the licensee shall review the assessments and information and shall approve the applicant's admission to the home unless,

(a) the home lacks the physical facilities necessary to meet the applicant's care requirements; 2007, c. 8, s. 44. (7).

(b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or 2007, c. 8, s. 44. (7).

(c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44. (7).

s. 44. (9) If the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out,

(a) the ground or grounds on which the licensee is withholding approval; 2007, c. 8, s. 44. (9).

(b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; 2007, c. 8, s. 44. (9).

(c) an explanation of how the supporting facts justify the decision to withhold approval; and 2007, c. 8, s. 44. (9).

(d) contact information for the Director. 2007, c. 8, s. 44. (9).

Findings/Faits saillants :

1. The licensee has failed to ensure that the home approved the applicant's admission to the home unless the home lacked the nursing expertise necessary to meet the applicant's care requirements.

Central East Local Health Integration Network (CELHIN) sent a copy of a letter sent to applicant #019 indicating a denial of admission. A review of this letter indicated the home lacked the nursing expertise to meet the applicant's care requirements.

The explanation provided by the licensee in the refusal letter was that a Behavioural Assessment Tool indicated applicant #019 had identified physical responsive behaviours. The letter also stated that since the applicant would require a secured unit, such events would pose a safety risk for others, as well as the applicant.

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A review of the admission documents made available to the home indicated applicant #019 did have previous incidents of exhibiting physically responsive behaviours but these behaviours had declined significantly. According to the same Behavioural Assessment Tool, there was a one-time incident of physical responsive behaviours. This assessment also stated that the applicant was adjusting well to their current environment which was similar to a long-term care home. It was anticipated the applicant would adjust well to long-term care placement.

An interview with placement care coordinator (PCC) #137 with CELHIN indicated they did not believe there was any reason applicant #019 could not be managed by a long-term care home. The PCC stated that applicant #019 had been approved for admission at two other long-term care homes in the area. The PCC also indicated that the applicant was currently in an environment where there are no issues with them getting along with others.

An interview with DOC #122 indicated the home had secured units which applicant #019 required and had staff trained in dementia care, as well as, Behaviour Support Ontario staff within the home and psychiatric resources available outside the home. The DOC stated that at the time of their refusal of applicant #019's admission to the home, they did not feel the applicant was a good fit for their secured units.

The home failed to demonstrate how the staff of the home lacked the nursing expertise necessary to meet the applicant's care requirements and therefore did not have grounds to refuse the applicant's admission. [s. 44. (7) (b)]

2. The licensee has failed to ensure that if the licensee withholds approval for admission, the licensee shall give to the applicant a written explanation of how the supporting facts justified the decision to withhold approval.

Central East Local Health Integration Network (CELHIN) sent a copy of a letter sent to applicant #019 indicating a denial of admission by the home. A review of this letter indicated the home lacked the nursing expertise to meet the applicant's care requirements.

The explanation provided by the licensee in the refusal letter was that a Behavioural Assessment Tool indicated applicant #019 had physical responsive behaviours. The letter also stated that since the applicant would require a secured unit, such events would

pose a safety risk for others, as well as the applicant.

An interview with DOC #122 indicated that at the time of their refusal, they did not feel applicant #019 was a good fit for their secured units. The DOC stated the letter did not provide an explanation of how the home lacked nursing expertise to provide the care required.

Two other recent letters denying admission to the home were reviewed with one failing to provide a written explanation of how the supporting facts justified the decision to withhold approval as follows:

A review of a letter sent to applicant #017, indicated the home lacked the nursing expertise to meet the applicant's care requirements. The letter stated a Behavioural Assessment Tool identified verbal and physical responsive behaviours with interventions that would not be possible in a long-term care home. The letter also indicated residents of the home may trigger the applicant's responsive behaviours which would pose a safety risk.

An interview with DOC #122 indicated they thought applicant #017 had physical responsive behaviours that could escalate in a long-term care environment. The DOC did however indicate that the letter failed to explain how the home lacked the nursing expertise to deal with such behaviours.

An interview with DOC #122 confirmed the letters sent to applicant #019 and #017 did not explain how the facts justified the decision to withhold approval based on the grounds that the home did not have the nursing expertise to meet the applicants' care requirements. [s. 44. (9) (c)]

Issued on this 30th day of January, 2020

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

Original report signed by the inspector.