

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

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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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	•	Type of Inspection / Genre d'inspection
Feb 11, 2014	2014_250511_0004	H-000917- 13	Complaint

Licensee/Titulaire de permis

2063414 ONTARIO LIMITED AS GENERAL PARTNER OF 2063414 INVESTMENT LP

302 Town Centre Blvd.,, Suite #200, TORONTO, ON, L3R-0E8

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

LEISUREWORLD CAREGIVING CENTRE - BRANTFORD 389 WEST STREET, BRANTFORD, ON, N3R-3V9

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs ROBIN MACKIE (511)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): February 6 and 7, 2014

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care (DOC), registered staff, Personal Support Workers, residents and the Community Care Access Centre (CCAC) placement coordinator.

During the course of the inspection, the inspector(s) observed the provision of care, reviewed resident specific clinical records, the home's applicable policy, procedure and educational training records.

Ad-hoc notes were used during this inspection.

Findings of Non-Compliance were found during this inspection.



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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		
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 LTCHA, 2007 S.O. 2007, c.8, s. 44. Authorization for admission to a home



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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).

Findings/Faits saillants:



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1. The licensee did not ensure, when the appropriate placement coordinator gave the licensee copies of the assessments and information that were required to have been taken into account, under subsection 43 (6), and the licensee reviewed the assessments and information, the home approved the applicant's admission to the home unless the staff of the home lacked the nursing expertise necessary to meet the applicant's care requirements.

In December, 2013 the home sent a refusal letter to the client and copied the CCAC and Ministry of Health and Long Term Care. The letter detailed the withholding of approval was necessary as the home had a high number of wounds at the present time and did not have the resources to meet the client needs, specifically the number of complex wounds of the client required more care than the home's staff were able to provide. The CCAC clinical records reviewed indicated the client had multiple wounds. An interview with the CCAC placement coordinator confirmed the home stated the admission was withheld based on the number and complexity of the client's wounds.

A review of the home's staffing resources with the Administrator confirmed the home had registered staffing on all units and had a designated, registered staff, wound care champion, who held a certificate of achievement from Smith and Nephew on wound care dated April 24, 2012. Additionally, 11 registered staff had completed additional training and education on wound care staging, dressing and documentation on August 27, 2013 and 8 more registered staff attended similar training in September 2013. The DOC confirmed the home had access to additional training, education and resources as required through their wound care supplier. The Administrator and DOC confirmed, after further review of the placement coordinator's assessments and information, the home did not lack the nursing expertise necessary to meet the client's care requirements nor were there insufficient resources to meet the care needs of the client in the home at the time of application. [s. 44. (7) (b)]



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Issued on this 12th day of February, 2014

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