

Ministry of Long-Term Care
Long-Term Care Operations Division
Long-Term Care Inspections Branch

London District
130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

Amended Public Report Cover Sheet (A1)

Amended Report Issue Date: August 15, 2023	
Original Report Issue Date: August 3, 2023	
Inspection Number: 2023-1028-0004 (A1)	
Inspection Type: Critical Incident System	
Licensee: Maplewood Nursing Home Limited	
Long Term Care Home and City: Maple Manor Nursing Home, Tillsonburg	
Amended By Tatiana Pyper (733564)	Inspector who Amended Digital Signature

AMENDED INSPECTION SUMMARY

This report has been amended to: extend compliance due date to August 25, 2023 to allow the home sufficient time to comply with part two of the order.

Amended Public Report (A1)

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Long Term Care Home and City: Maple Manor Nursing Home, Tillsonburg	
Lead Inspector Tatiana Pyper (733564)	Additional Inspector(s)
Amended By Tatiana Pyper (733564)	Inspector who Amended Digital Signature

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This report has been amended to: extend compliance due date to August 25, 2023 to allow the home sufficient time to comply with part two of the order.

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): July 27, and 31, 2023

The following intake(s) were inspected:

- Intake: #00092682, CI #1049-000011-23 related to residents' rights.

The following **Inspection Protocols** were used during this inspection:

Infection Prevention and Control
Residents' Rights and Choices

AMENDED INSPECTION RESULTS

COMPLIANCE ORDER CO #001 RESIDENTS' BILL OF RIGHTS

NC #001 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: FLTCA, 2021, s. 3 (1) 18.

The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:

Specifically, the licensee shall:

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1. Review and update the home's Privacy and Confidentiality Policy to include directions on staff use of cell phones and social media related to resident care and confidentiality by the Compliance Order Due Date.

2. Review updated home's Privacy and Confidentiality Policy including directions on staff use of cell phones and social media related to resident care and confidentiality with all direct care staff by the Compliance Order Due Date. Ensure the training is documented, including the date the training occurred, the content of the training, and the staff members who completed the training.

Grounds

The licensee has failed to ensure that five residents of the home were afforded privacy in treatment and in caring for their personal needs.

Rationale and Summary

A Critical Incident System (CIS) report was received by the Director, after the home had been informed of a privacy breach that had occurred, involving five residents of the home. Review of the home's investigation notes indicated that the Administrator had informed the residents and their substitute decision makers of a privacy breach that had occurred at the home.

Review of the home's Personal Health Information Protection Act Policy ADM -II-16 stated that the home had the responsibility to protect the personal health information and privacy of all residents. The policy did not contain directions related to the use of staff personal phones and social media, to maintain the confidentiality and privacy of all residents.

Sources: review of home's investigation notes, review of Personal Health Information Protection Act Policy ADM -II-16, dated September 2016, and interview with the Administrator.

[733564]

This order must be complied with by August 25, 2023

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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/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). 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 or AMP was served on the licensee.

The written request for review must include:

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

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

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

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If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

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 an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

Health Services Appeal and Review Board

Attention Registrar
151 Bloor Street West, 9th Floor
Toronto, ON, M5S 1S4

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th Floor
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Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website www.hsarb.on.ca.