



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

**Rapport d'inspection
prévue le *Loi de 2007
les foyers de soins de
longue durée***

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

Toronto Service Area Office
55 St. Clair Avenue West, 8th Floor
Toronto ON M4V 2Y7

Bureau régional de services de Toronto
55, avenue St. Clair Ouest, 8^{ième} étage
Toronto, ON M4V 2Y7

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

Telephone: 416-325-9297
1-866-311-8002

Téléphone: 416-325-9297
1-866-311-8002

Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
conformité

Facsimile: 416-327-4486

Télécopieur: 416-327-4486

Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection December 2, 6, 2010	Inspection No/ d'inspection 2010_178_8543_06Dec094318	Type of Inspection/Genre d'inspection Complaint T2674
Licensee/Titulaire Mon Sheong Foundation, 36 D'Arcy St., Toronto, ON, M5T 1J7, Fax 905-508-0829		
Long-Term Care Home/Foyer de soins de longue durée Mon Sheong Home for the Aged, 36 D'Arcy Street, Toronto ON, M5T 1J7.		
Name of Inspector(s)/Nom de l'inspecteur(s) Susan Lui (#199), Rosemary Lam (#132),		
Inspection Summary/Sommaire d'inspection		
<p>The purpose of this inspection was to conduct a complaint inspection.</p> <p>During the course of the inspection, the inspector spoke with: Administrator, RAI Coordinator/Acting Director of Care, Registered staff, health care aids, activation employee, residents and family members.</p> <p>During the course of the inspection, the inspector: reviewed resident records, reviewed the home's policy for Prevention of Abuse and Neglect, reviewed the home's recent incident reports, reviewed resident council minutes, reviewed staffing schedule, observed staff interactions with residents.</p> <p>The following Inspection Protocols were used during this inspection: Prevention of Abuse, Neglect and Retaliation Dignity, Choice and Privacy.</p> <p><input checked="" type="checkbox"/> Findings of Non-Compliance were found during this inspection. The following action was taken: 2 WN 2 VPC</p> <p>Corrected Non-Compliance is listed in the section titled Corrected Non-Compliance.</p>		



NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

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

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 suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with LTCHA, 2007, S.O. c. 8, s. 76(2) 3, 4. Every licensee shall ensure that no person mentioned in subsection (1) performs their responsibilities before receiving training in the areas mentioned below:
3. The long-term care home's policy to promote zero tolerance of abuse and neglect of residents.
4. The duty under section 24 to make mandatory reports.

Findings:

- 1) Training for Resident Abuse and Neglect Policy was not attended by approximately 50 % of the staff providing care, including the individual accused of verbal abuse.
- 2) Some staff showed misunderstanding of the home's "zero-tolerance" policy for resident abuse. Two staff members stated that if they found another staff member verbally abusing a resident, they would counsel and warn the staff, and not report the incident to their supervisor or nurse in charge.

Inspector ID #: 199, 132

Additional Required Actions:

VPC - pursuant to the *Long-Term Care Homes Act, 2007*, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance with the requirement that no person mentioned in subsection (1) performs their responsibilities before receiving training in the long-term care home's policy to promote zero tolerance of abuse and neglect of residents and the duty under section 24 to make mandatory reports, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with LTCHA, 2007, S.O. 2007, c.8, s. 3(1), 1, 4. Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:
1. Every resident has the right to be treated with courtesy and respect and in a way that fully recognizes the resident's individuality and respects the resident's dignity
4. Every resident has the right to be properly sheltered, fed, clothed, groomed and cared for in a manner consistent with his or her needs.



Findings:

Identified PSW did not treat identified resident with courtesy and respect, and did not care for the resident in a manner which met his emotional needs.

- The Administrator has completed an investigation into the allegation of verbal abuse and neglect, and has forwarded this to the Ministry along with their Plan of Corrective Action. Plan includes providing further education on the Home's policy of zero tolerance of abuse and neglect to all staff on every shift, in-service training to staff on communication skills with residents, families and co-workers, and education to staff, residents and families, regarding the complaints procedure based on the home's policy.

Inspector ID #: 199, 132

Additional Required Actions:

VPC - pursuant to the *Long-Term Care Homes Act, 2007*, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance with the requirement that, every resident has the right to be treated with courtesy and respect and in a way that fully recognizes the resident's individuality and respects the resident's dignity, and every resident has the right to be properly sheltered, fed, clothed, groomed and cared for in a manner consistent with his or her needs, to be implemented voluntarily.

CORRECTED NON-COMPLIANCE Non-respects a Corrigé				
REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	ACTION/ORDER #	INSPECTION REPORT #	INSPECTOR ID #
M1.6 (as in current legislation) LTCHA, c.8, s. 18(1); O Reg 79/10, 8.(1) (a), (b)			January 15, 2010	132

Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné		Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.	
Title: _____ Date: _____		Date of Report: (if different from date(s) of inspection). <i>Jan 21, 2011</i>	