



**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

London Service Area Office
130 Dufferin Avenue 4th floor
LONDON ON N6A 5R2
Telephone: (519) 873-1200
Facsimile: (519) 873-1300

**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
London
130 avenue Dufferin 4ème étage
LONDON ON N6A 5R2
Téléphone: (519) 873-1200
Télécopieur: (519) 873-1300

Public Copy/Copie du public

Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Oct 17, 2016	2016_508137_0023	028502-16	Resident Quality Inspection

Licensee/Titulaire de permis

CVH (No.2) LP
c/o Southbridge Care Homes 766 Hespeler Road, Suite 301 CAMBRIDGE ON N3H 5L8

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

PARKVIEW MANOR HEALTH CARE CENTRE
98-3RD STREET SOUTH EAST P.O. BOX 298 CHESLEY ON N0G 1L0

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

MARIAN MACDONALD (137), DOROTHY GINTHER (568)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Resident Quality Inspection inspection.

This inspection was conducted on the following date(s): October 11-13, 2016

A Follow-Up inspection, under Log # 006028-16, was also completed during the Resident Quality Inspection, related to 24/7 Registered Nursing coverage.

During the course of the inspection, the inspector(s) spoke with Executive Director, Director of Care, Office Manager, Nutrition Manager, Registered Dietitian, Program Manager, two Registered Nurses, two Registered Practical Nurses, two Personal Support Workers, one Dietary Aide, three Family Members and 20 + Residents.

The inspectors also conducted a tour of the home, observed the provision of resident care, resident/staff interactions, medication administration, medication storage areas and reviewed residents' clinical records, registered nursing schedules, relevant policies and procedures and meeting minutes.

The following Inspection Protocols were used during this inspection:

Falls Prevention

Family Council

Infection Prevention and Control

Medication

Nutrition and Hydration

Pain

Residents' Council

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 LTCHA, 2007 S.O. 2007, c.8, s. 8.
Nursing and personal support services**

Specifically failed to comply with the following:

s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

Findings/Faits saillants :



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1. The licensee has failed to ensure that there was at least one registered nurse, who was both an employee of the licensee and a member of the regular nursing staff of the home, on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

A review of the registered nursing staff schedule, for the period September 2 – October 13, 2016, revealed there were 12 out of 42 (28.5 per cent) night shifts covered by a registered nurse, from an employment agency, who was not a member of the regular nursing staff of the home.

During an interview, on October 11, 2016, the Executive Director # 100 and the Office Manager # 101 said the scheduled shifts were covered by a registered nurse, from an employment agency and was not a member of the regular nursing staff of the home but that the home had a plan in place to ensure the scheduled night shifts would be covered by a registered nurse, who was a member of the regular nursing staff of the home and to meet the legislative requirements.

The plan to have the scheduled night shifts covered by a registered nurse, who was a member of the regular nursing staff of the home, becomes effective. November 11, 2016.

A written notification and a voluntary plan of correction were previously issued on September 15, 2014, under Log # 001262-14 and Inspection # 2014_202165_0022. A written notification and a Compliance Order were previously issued on June 22, 2015, under Log # 008697-15 and Inspection # 2015_259520_0018.

A written notification and a Compliance Order were previously issued on January 20, 2016, under Log # 016999-15 and Inspection # 2016_262523_0004.

The scope of this area of non-compliance was determined to be a level one – isolated, the severity a level two – minimal harm and the compliance history a level four, as there was a history of previously related non-compliance. [s. 8. (3)]

Additional Required Actions:

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



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soins de longue durée**

Issued on this 17th day of October, 2016

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) : MARIAN MACDONALD (137), DOROTHY GINTHER
(568)

Inspection No. /

No de l'inspection : 2016_508137_0023

Log No. /

Registre no: 028502-16

Type of Inspection /

Genre

d'inspection: Resident Quality Inspection

Report Date(s) /

Date(s) du Rapport : Oct 17, 2016

Licensee /

Titulaire de permis : CVH (No.2) LP

c/o Southbridge Care Homes, 766 Hespeler Road, Suite
301, CAMBRIDGE, ON, N3H-5L8

LTC Home /

Foyer de SLD :

PARKVIEW MANOR HEALTH CARE CENTRE
98-3RD STREET SOUTH EAST, P.O. BOX 298,
CHESLEY, ON, N0G-1L0

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur :

Carole Woods



**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

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To CVH (No.2) LP, you are hereby required to comply with the following order(s) by
the date(s) set out below:



**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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Order # /

Ordre no : 001

Order Type /

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

Linked to Existing Order /

**Lien vers ordre
existant:** 2016_262523_0004, CO #001;

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

Order / Ordre :

The licensee shall ensure that at least one registered nurse who was both an employee of the licensee and a member of the regular nursing staff of the home was on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

Grounds / Motifs :



**Ministry of Health and
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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

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 licensee has failed to ensure that there was at least one registered nurse, who was both an employee of the licensee and a member of the regular nursing staff of the home, on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

A review of the registered nursing staff schedule, for the period September 2 – October 13, 2016, revealed there were 12 out of 42 (28.5 per cent) night shifts covered by a registered nurse, from an employment agency, who was not a member of the regular nursing staff of the home.

During an interview, on October 11, 2016, the Executive Director # 100 and the Office Manager # 101 said the scheduled shifts were covered by a registered nurse, from an employment agency and was not a member of the regular nursing staff of the home but that the home had a plan in place to ensure the scheduled night shifts would be covered by a registered nurse, who was a member of the regular nursing staff of the home and to meet the legislative requirements.

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A written notification and a Compliance Order were previously issued on January 20, 2016, under Log # 016999-15 and Inspection # 2016_262523_0004.

The scope of this area of non-compliance was determined to be a level one – isolated, the severity a level two – minimal harm and the compliance history a level four, as there was a history of previously related non-compliance. (137)

This order must be complied with /

Vous devez vous conformer à cet ordre d'ici le :

Nov 30, 2016



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Order(s) of the Inspector

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 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 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.



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RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

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

La demande de réexamen doit contenir ce qui suit :

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

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur
a/s Coordinateur des appels
Inspection de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



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En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Inspection de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsb.on.ca.

Issued on this 17th day of October, 2016

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

**Name of Inspector /
Nom de l'inspecteur :** MARIAN MACDONALD

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