



**Ministry of Health and
Long-Term Care**

**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**

Ottawa Service Area Office
347 Preston St 4th Floor
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Bureau régional de services d'Ottawa
347 rue Preston 4^{ième} étage
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Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Mar 19, 2015	2015_381592_0005	O-000951-14	Follow up

Licensee/Titulaire de permis

Chartwell Master Care LP
100 Milverton Drive Suite 700 MISSISSAUGA ON L5R 4H1

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

RESIDENCE CHAMPLAIN
428 Front Road West L'Orignal ON K0B 1K0

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

MELANIE SARRAZIN (592)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): February 27, 2015, on site.

During the course of the inspection, the inspector(s) spoke with the home's Administrator, Director of Care and Registered Nursing Staff.

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



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)

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).

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

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 :

1. The licensee has failed to 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.

Residence Champlain is 60 bed Long-Term Care Home in L'Original.

It was first identified on an inspection conducted on October 22, 2012 that there was no registered nurse, who is 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. A Voluntary Plan of Correction (VPC) was issued under LTCHA 2007, s. 8 (3) .

The home was noted to be non-compliant with 24/7 Registered Nurse coverage during the Resident Quality Inspection conducted on September 4, 2014. A compliance order was issued with a compliance date of November 30, 2014.

A follow-up inspection to the order was conducted on February 27, 2015.

The registered nursing staffing schedule from November 31, 2014 to February 26, 2015 was reviewed.

As per the reviewed schedules, there was no Registered nurse on duty and present in the home for the following 4 shifts:

December 8, 2014, there was no RN on the day shift.

December 14, 2014, there was no RN on the evening shift

January 25, 2015, there was no RN present on the evening shift



February 1, 2015, there was no RN present on the evening shift

On February 27, 2015, the DOC confirmed to Inspector #592 that on the above dates, there was no RN on site in the home. The DOC stated that since September 2014, the home did hire one RN to fulfill the night position. He further indicated that he has two part time positions vacant. He stated that one RN reduced her hours from full time to part time. The home has been actively recruiting for these positions with little success to date. The DOC told inspector #592 that the home still has a contract with a staffing agency that provides RN services to the home but occasionally the agency will not be able to fulfill the required RN shift. DOC further told inspector #592 that occasionally, the agency does not have any RN to provide to the home, as such the Agency will send a RPN to have the shift covered, therefore no Registered Nurse are on duty and present in the home.

The DOC stated to Inspector #592, that when there was no RN on site, one regular RPN was working in the home and that he was either present in the home or was on-call and available by phone to address any nursing issues.

Under O.Reg. 79/10, s. 45. (2) an “emergency” means an unforeseen situation of a serious nature that prevents a registered nurse from getting to the long-term care home.

In an interview with the DOC it was confirmed that there was no unforeseen situation of a serious nature that prevented a registered nurse from getting to the long-term care home.

Therefore the licensee did not ensure that there was a registered nurse on site at all times, in the long-term care home. [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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Loi de 2007 sur les foyers de
soins de longue durée**

Issued on this 19th day of March, 2015

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

Original report signed by the inspector.



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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*

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*

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Direction de l'amélioration de la performance et de la conformité**

Public Copy/Copie du public

Name of Inspector (ID #) /

Nom de l'inspecteur (No) : MELANIE SARRAZIN (592)

Inspection No. /

No de l'inspection : 2015_381592_0005

Log No. /

Registre no: O-000951-14

Type of Inspection /

Genre

Follow up

d'inspection:

Report Date(s) /

Date(s) du Rapport : Mar 19, 2015

Licensee /

Titulaire de permis :

Chartwell Master Care LP
100 Milverton Drive, Suite 700, MISSISSAUGA, ON,
L5R-4H1

LTC Home /

Foyer de SLD :

RESIDENCE CHAMPLAIN
428 Front Road West, L'Orignal, ON, K0B-1K0

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur :

LUCIE GOLDEN

To Chartwell Master Care LP, you are hereby required to comply with the following order(s) by the date(s) set out below:

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*

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
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Order # /

Ordre no : 001

Order Type /

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

Linked to Existing Order /

Lien vers ordre existant: 2014_198117_0022, 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 prepare, submit and implement a revised plan with new strategies for achieving compliance to meet the requirement that at least one registered nurse who is both an employee 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. The plan shall also include all recruiting and retention strategies.

This plan must be submitted in writing to Melanie Sarrazin, LTCH Inspector at 347 Preston Street, 4th floor, Ottawa, Ontario K1S 3J4 or by fax at 1-613-569-9670 on or before April 2, 2015.

Grounds / Motifs :

1. The licensee has failed to 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.

Residence Champlain is 60 bed Long-Term Care Home in L'Original. It was first identified on an inspection conducted on October 22, 2012 that there was no registered nurse, who is 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. A Voluntary Plan of Correction (VPC) was issued under

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de l'article 154 de la *Loi de 2007 sur les foyers
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LTCHA 2007, s. 8 (3) .

The home was noted to be non-compliant with 24/7 Registered Nurse coverage during the Resident Quality Inspection conducted on September 4, 2014. A compliance order was issued with a compliance date of November 30, 2014.

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On February 27, 2015, the DOC confirmed to Inspector #592 that on the above dates, there was no RN on site in the home. The DOC stated that since September 2014, the home did hire one RN to fulfill the night position. He further indicated that he has two part time positions vacant. He stated that one RN reduced her hours from full time to part time. The home has been actively recruiting for these positions with little success to date. The DOC told inspector #592 that the home still has a contract with a staffing agency that provides RN services to the home but occasionally the agency will not be able to fulfill the required RN shift . DOC further told inspector #592 that occasionally , the agency does not have any RN to provide to the home, as such the Agency will send a RPN to have the shift covered, therefore no Registered Nurse are on duty and present in the home.

The DOC stated to Inspector #592, that when there was no RN on site, one regular RPN was working in the home and that he was either present in the home or was on-call and available by phone to address any nursing issues.

Under O.Reg. 79/10, s. 45. (2) an “emergency” means an unforeseen situation of a serious nature that prevents a registered nurse from getting to the long-term



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care home.

In an interview with the DOC it was confirmed that there was no unforeseen situation of a serious nature that prevented a registered nurse from getting to the long-term care home.

Therefore the licensee did not ensure that there was a registered nurse on site at all times, in the long-term care home.

(592)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Jun 12, 2015



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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
Performance Improvement and Compliance 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
Performance Improvement and Compliance
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
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11^e 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
Direction de l'amélioration de la performance et de la
conformité
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.hsarb.on.ca.

Issued on this 19th day of March, 2015

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

**Name of Inspector /
Nom de l'inspecteur :** Melanie Sarrazin

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