

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

Rapport d'inspection prévue
sous la Loi de 2007 sur les foyers
de soins de longue durée

Long-Term Care Homes Division
Long-Term Care Inspections Branch

Division des foyers de soins de
longue durée
Inspection de soins de longue durée

Toronto Service Area Office
5700 Yonge Street 5th Floor
TORONTO ON M2M 4K5
Telephone: (416) 325-9660
Facsimile: (416) 327-4486

Bureau régional de services de
Toronto
5700, rue Yonge 5e étage
TORONTO ON M2M 4K5
Téléphone: (416) 325-9660
Télécopieur: (416) 327-4486

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Nov 29, 2019	2019_650565_0019	017323-19, 017428- 19, 019051-19	Complaint

Licensee/Titulaire de permis

Providence St. Joseph's and St. Michael's Healthcare
3276 St. Clair Avenue East TORONTO ON M1L 1W1

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

Providence Healthcare
3276 St. Clair Avenue East SCARBOROUGH ON M1L 1W1

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

MATTHEW CHIU (565), CECILIA FULTON (618)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): October 23, 24, 28, 29, 30, and 31, 2019.

During the course of the inspection, the following Complaint (CO) and Critical Incident System (CIS) intakes were inspected:

- CO intake log #017428-19 related to prevention of abuse and neglect,**
- CO intake log #019051-19 related to withholding admission, and**
- CIS intake log #017323-19 related to improper care of a resident.**

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Resident Care (DRC), Resident Care Manager (RCM), Resident Care Supervisors (RCS), Social Worker (SW), Operations Leader Mechanical (OLM), General Maintenance (GM), Intake Coordinator (IC), Physiotherapist (PT), Registered Nurses (RN), Registered Practical Nurses (RPN), Resident Assistants (RA), Residents, and Family Members.

The inspectors conducted observations of resident to resident interactions, staff to resident interactions and provision of care, record review of application, resident and home records, staffing schedules and relevant policies and procedures.

**The following Inspection Protocols were used during this inspection:
Admission and Discharge
Prevention of Abuse, Neglect and Retaliation**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Légende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 44. Authorization for admission to a home

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).

s. 44. (9) If the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out,

(a) the ground or grounds on which the licensee is withholding approval; 2007, c. 8, s. 44. (9).

(b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; 2007, c. 8, s. 44. (9).

(c) an explanation of how the supporting facts justify the decision to withhold approval; and 2007, c. 8, s. 44. (9).

(d) contact information for the Director. 2007, c. 8, s. 44. (9).

Findings/Faits saillants :

1. The licensee has failed to approve an applicant's admission to the home under LTCHA, 2007, S.O., c. 8, s. 44. (7).

As outlined in LTCHA, 2007, S.O., c. 8, s. 44. (7), the licensee shall approve the applicant's admission to the home unless the home lacks the physical facilities necessary to meet the applicant's care requirements; the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or circumstances exist which are provided for in the regulations as being a ground for withholding approval.

a. The Ministry of Long Term Care (MLTC) received a complaint on an identified date related to the approval for admission to Providence Healthcare for applicant #001 was withheld by the home.

The home issued a written notice for withholding approval to applicant #001's application. It stated that the home lacked the physical resources, staffing support and expertise, which were necessary to safely meet the applicant's care requirements, and the home declined the application. The written notice further stated the applicant's behaviours, their care requirements, and the home's staffing and nursing support that related to the high level observation and staff assistance required for the applicant.

Review of the application referral, under behavioural assessment, indicated that applicant #001 had identified responsive behaviours. Some of the applicant's identified responsive behaviours were related to an identified behavioural issue which was stopped as of an identified date. Since then, some identified responsive behaviours were not present. The referral stated the applicant's care requirements can be met in Long Term Care (LTC).

Interview with IC #100 indicated that the home had criteria for approving admission applications, and IC #100 was the first staff member reviewing all applications. If IC #100 cannot determine the approval, they will refer the application to the DRC for review. IC #100 stated the home had a designated behavioural nurse and a psychiatrist who worked with the team to develop the plans of care for managing the residents' behaviours. If indicated, the residents could be referred to the outside resources such as the Baycrest Behavioural Support Outreach Team (BBSOT) for assessments. IC #100 further stated that the home had residents who were non-compliant to care or medications and demonstrated physical aggressive behaviours posing risk of harm to themselves or others. If the residents declined the behavioural assessments or medication, the home would explain to the residents or their families, and to discuss further interventions. If necessary, one on one (1:1) care could be implemented for safety. Further, IC #100 mentioned the home had residents who had the identified behaviours, and the home had implemented individualized plans for their behaviours.

Interview with the DRC indicated that when they reviewed applicant #001's application, they found the applicant had the identified responsive behaviours, posing risk of harm to themselves or others. The DRC further stated the home had residents having similar identified behaviours. The home had multidisciplinary behavioural rounds involving the designated behavioural nurse, the Baycrest psychogeriatric resource consultant, and the team to evaluate the residents' behaviours. The home had implemented 1:1 care for some of their residents to ensure safety and had individualized plan of care to manage their residents' identified behavioural care needs. The DRC stated applicant #001's

application did not indicate they required acute hospitalization for their behaviours or any related medical issues. The home had the physical facility and the nursing expertise to manage the applicant's care requirements. The DRC indicated the reason for withholding approval was related to the staffing resources that required for the specified care and assistance for the applicant.

b. Due to a non-compliance identified under s. 44. (7), the sample was expanded for applicant #005 and #006.

The home issued the written notices for withholding approval to applicants #005 and #006's applications. They stated that the home lacked the physical resources, staffing support and medical expertise, which were necessary to safely meet the applicants' care requirements, and the home declined the applications. The written notices further stated the applicants' behaviours, their care requirements, and the home staffing and nursing support that related to the high level observation and staff assistance required for the applicants.

Interview with the DRC indicated that the home had the physical facility and the nursing expertise to manage the above applicants' care requirements. The reasons for withholding approval were similar to applicant #001 that they were related to the staffing resources required for the applicants' behaviours for safety.

The DRC acknowledged that the home withheld the approval for applicants #001, #005, and #006's admissions were not based on the requirements specified under LTCHA, 2007, S.O., c. 8, s. 44. (7). [s. 44. (7)]

2. The licensee has failed to ensure that if the licensee withholds approval for admission, a written notice setting out the following was given to the persons described in subsection (10):

- Detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care, and
- An explanation of how the supporting facts justify the decision to withhold approval.

a. The MLTC received a complaint on an identified date related to the approval for admission to Providence Healthcare for applicant #001 was withheld by the home.

The home issued a written notice for withholding approval to applicant #001's application. It stated that the home lacked the physical resources, staffing support and expertise,

which were necessary to safely meet the applicant's care requirements, and the home declined the application. The written notice further stated the applicant's behaviours, their care requirements, and the home staffing and nursing support that related to the high level observation and staff assistance required for the applicant.

The written notice did not provide a detailed explanation of the facts that related to the lack of expertise and how the supporting facts justify the decision to withhold approval.

b. Due to non-compliance identified under s. 44. (9), the sample was expanded for applicant #005 and #006.

The home issued the written notices for withholding approval to applicants #005 and #006's applications. They stated that the home lacked the physical resources, staffing support and medical expertise, which were necessary to safely meet the applicants' care requirements, and the home declined the applications. The written notices further stated the applicants' behaviours, their care requirements, and the home staffing and nursing support that related to the high level observation and staff assistance required for the applicants.

The written notices for applicants #005 and #006 did not provide a detailed explanation of the facts that related to the lack of expertise and how the supporting facts justify the decisions to withhold approval.

Interview with the DRC indicated that the above mentioned written notifications had stated the supporting facts related to the applicants' and the home's conditions. The DOC acknowledged that the written notifications did not explain in detail about the mentioned expertise and how the supporting facts justify their decision to withhold approval. [s. 44. (9)]

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 to ensure that an applicant's admission to the home is approved under LTCHA, 2007, S.O., c. 8, s. 44. (7) and a detailed explanation for withholding admission is provided under 44. (9), to be implemented voluntarily.

Issued on this 4th day of December, 2019

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

Original report signed by the inspector.