



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 prévue le Loi de 2007 les foyers de soins de longue

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

Toronto Service Area Office 55 St. Clair Avenue West, 8th Floor TORONTO, ON, M4V-2Y7 Telephone: (416) 325-9297 Facsimile: (416) 327-4486

Bureau régional de services de Toronto 55, avenue St. Clair Ouest, 8ième étage TORONTO, ON, M4V-2Y7 Téléphone: (416) 325-9297 Télécopieur: (416) 327-4486

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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Jul 20, Aug 9, Oct 19, 2011; 2011_102132_0005; Complaint

Licensee/Titulaire de permis

PROVIDENCE 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

ROSEMARY LAM (132)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with Resident Aides, Registered staff and management staff

During the course of the inspection, the inspector(s) reviewed medical files.

The following Inspection Protocols were used during this inspection:

Personal Support Services

Reporting and Complaints

Findings of Non-Compliance were found during this inspection.

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. 6. Plan of care
Specifically failed to comply with the following subsections:

s. 6. (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan. 2007, c. 8, s. 6 (7).

Findings/Faits saillants :

Staff were found not following a resident's plan of care, family had to complain about the same issues to several members of the Administrative staff for over a six months period before they are resolved.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 101. Dealing with complaints
Specifically failed to comply with the following subsections:

s. 101. (1) Every licensee shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

1. The complaint shall be investigated and resolved where possible, and a response that complies with paragraph 3 provided within 10 business days of the receipt of the complaint, and where the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately.

2. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 3 shall be provided as soon as possible in the circumstances.

3. A response shall be made to the person who made the complaint, indicating,

i. what the licensee has done to resolve the complaint, or

ii. that the licensee believes the complaint to be unfounded and the reasons for the belief. O. Reg. 79/10, s. 101 (1).

Findings/Faits saillants :

The Licensee's response letter to an identified complainant did not address all the issues raised in the letter and did not outline what the Licensee has done to resolve these concerns. The complainant had previously reported and confirmed by management staff that front line staff were not consistently following the care plan directions on several occasions. [101.(1)3.i]



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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 the Licensee's response letter addresses all issues raised in the complaint letter, including but not limited to: i) what the licensee has done to resolve the complaint(s), or ii. that the licensee believes the complaint to be unfounded and the reasons for the belief., to be implemented voluntarily.

Issued on this 19th day of October, 2011

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

A handwritten signature in cursive script, appearing to read "Romney Jam".

