



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

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

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

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

**Health System Accountability and
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Performance Improvement and
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**Division de la responsabilisation et de la
performance du système de santé
Direction de l'amélioration de la
performance et de la conformité**

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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
Feb 12, 2015	2015_200148_0007	O-001116-14 AND O-001509-15	Complaint

Licensee/Titulaire de permis

458422 ONTARIO LIMITED
220 EMMA STREET CORNWALL ON K6J 5V8

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

SANDFIELD PLACE
220 EMMA STREET CORNWALL ON K6J 5V8

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

AMANDA NIXON (148)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): January 28-30, 2015.

During the course of the inspection, the inspector(s) spoke with the home's Administrator, Director of Care (DOC), Registered Nursing Staff, Personal Support Workers, the placement coordinator and residents. In addition, the Inspector reviewed resident health care records including flow sheets, staffing patterns and an admission assessment of an applicant.

**The following Inspection Protocols were used during this inspection:
Admission and Discharge
Personal Support Services**

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

2 WN(s)

0 VPC(s)

0 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 O.Reg 79/10, s. 33. Bathing
Specifically failed to comply with the following:**

s. 33. (1) Every licensee of a long-term care home shall ensure that each resident of the home is bathed, at a minimum, twice a week by the method of his or her choice and more frequently as determined by the resident's hygiene requirements, unless contraindicated by a medical condition. O. Reg. 79/10, s. 33 (1).

Findings/Faits saillants :



1. The licensee has failed to ensure that Resident #1 is bathed, at a minimum, twice a week by the method of his or her choice, unless contraindicated by a medical condition.

Resident #1 has a bathing preference for tub baths. As indicated by the resident's power of attorney for care, Resident #1 was not provided a tub bath on a date in December, 2014 and two dates in January, 2015.

The home manages a bathing schedule which includes for the provision of bathing twice a week for Resident #1, on Mondays and Fridays. Staff who regularly care for the resident indicate that the resident prefers a tub bath and there are no medical reasons to contraindicate the provision of tub baths.

A review of the health care record, supports that bathing was not provided by staff as per the bathing schedule on the two dates in January, 2015. The record does indicate that bathing was provided on the identified date in December, 2014, in the form of a bed bath.

In discussion with PSW staff members and the home's DOC, it was determined that when a PSW becomes unavailable to work a scheduled shift and a replacement staff member is not found, that the normally scheduled "bath person" (PSW) would be pulled to work on the floor. This results in the provision of bed baths rather than the preferred tub bath. A review of the staffing schedule supports that PSW shift(s) were not able to be filled on the two dates in January, 2015, despite the home's attempts to do so.

On an identified date in December, 2014 and on two identified dates in January, 2015, Resident #1 was not provided with bathing by a method of his/her choice. [s. 33. (1)]

**WN #2: 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. (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 did not ensure that when the licensee withholds approval of an applicant, the licensee shall provide a written notice.

In accordance with LTCHA 2007, s.45, the placement co-ordinator (Community Care Access Centre) shall provide the licensee with the applicants assessments and related information. The licensee will review the assessments and approve or withhold the applicant's admission to the home. If the licensee withholds approval for admission a written notice will be provided to the applicant, the Director under the Act, and the placement co-ordinator which includes the grounds upon which the licensee is withholding approval.

The placement coordinator, represented by a staff member of the Champlain Community Care Access Center (CCAC), reported that a written notice was requested for Client #1 on August 19, 2014. A subsequent request for a written notice was made on September 15, 2014. As of January 30, 2015, the CCAC has not received a written notice indicating the grounds upon which the licensee is withholding approval for Client #1.

The Inspector spoke with the home's DOC who indicated that it is likely a written notice has not been provided due to other priorities in the home. The DOC reviewed the assessments as provided by CCAC, dated December 2013, based upon the available assessments the DOC determined that the home lacks the physical facilities to necessary to meet the applicant's care requirements. [s. 44. (9)]



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Issued on this 17th day of February, 2015

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

Original report signed by the inspector.