Ontario

Ministry of Long-Term Care

Ministère des Soins de longue durée

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

Rapport d'inspection en vertu de la Loi de 2007 sur les foyers de soins de longue durée

Long-Term Care Operations Division
Long-Term Care Inspections Branch

Division des opérations relatives aux soins de longue durée
Inspection de soins de longue durée

Sudbury Service Area Office
159 Cedar Street Suite 403
SUDBURY ON P3E 6A5
Telephone: (705) 564-3130
Facsimile: (705) 564-3133

Bureau régional de services de Sudbury
159, rue Cedar Bureau 403
SUDBURY ON P3E 6A5
Téléphone: (705) 564-3130
Télécopieur: (705) 564-3133

Public Copy/Copie du rapport public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
May 4, 2021	2021_853692_0006	004628-21, 004837-21	Complaint

Licensee/Titulaire de permis

Anson General Hospital
58 Anson Drive Iroquois Falls ON P0K 1E0

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

South Centennial Manor
240 Fyfe Street Iroquois Falls ON P0K 1E0

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

SHANNON RUSSELL (692), AMANDA BELANGER (736)

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): April 20-22, 2021.

The following intake was inspected upon during this Complaint inspection:
-One log, which resulted from a complaint that had been submitted to the Director regarding the admission of a resident without the authorized approval of the placement co-ordinator.

The following Critical Incident System (CIS) intake related to the same concerns (admission of a resident without the approval of the placement co-ordinator) was completed during this Complaint inspection.

A Follow Up inspection #2021_853692_0006 and a CIS inspection #2021_853692_0007 were conducted concurrently with this inspection.

During the course of the inspection, the inspector(s) spoke with the Director of Care (DOC), Placement Admissions Coordinator with the North East Local Health Integration Network (NELHIN), Executive Assistant to the DOC, Housekeepers, Registered Nurses (RNs), Registered Practical Nurses (RPNs), Personal Support Workers (PSWs), and residents.

The Inspector(s) also conducted a daily tour of resident care areas, observed the provision of care and services to residents, observed staff to resident and resident to resident interactions, observed infection control practices, reviewed relevant health care records, internal investigation notes, as well as licensee policies, procedures and programs.

The following Inspection Protocols were used during this inspection:
Admission and Discharge
Infection Prevention and Control

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	
Legend WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	Légende 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. 49. A licensee of a long-term care home shall not admit a person unless the person's admission to the home is authorized by the placement co-ordinator for the geographic area where the home is located, and shall admit a person whose admission is so authorized. 2007, c. 8, s. 49.

Findings/Faits saillants :

1. The licensee has failed to ensure that they had received authorized approval by the placement co-ordinator prior to admitting a resident to the Long-Term Care Home (LTCH).

A complaint and a Critical Incident System (CIS) report were submitted to the Director regarding a concern that the LTCH had not followed the admission process and had completed an exchange of residents from another LTCH prior to receiving approval from the placement co-ordinator of the North East Local Health Integration Network (NELHIN).

In an interview with Placement Admissions Co-ordinator from the NELHIN, they identified that the Director of Care (DOC) had admitted a resident who had been third on the waitlist, by passing two other residents; prior to their approval.

The DOC identified to Inspector #692 that they were aware of the admission process and that they had been working with the NELHIN and another LTCH for an exchange of residents. The DOC indicated that they had facilitated the admission of a resident from another LTCH prior to receiving authorized approval from the placement co-ordinator.

Sources: CIS report; residents admission documents and progress notes; MICs group of health services LTCH admission information package; interviews with the Placement Admissions Co-ordinator at the NELHIN and the DOC. [s. 49.]

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 the licensee shall not admit a person unless the person's admission to the home is authorized by the placement co-ordinator for the geographic area where the home is located, to be implemented voluntarily.

Issued on this 6th day of May, 2021

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

Original report signed by the inspector.