



**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 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**

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Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Jan 17, 2019	2019_776613_0003	006222-18, 006226-18	Follow up

Licensee/Titulaire de permis

St. Joseph's General Hospital Elliot Lake
70 Spine Road ELLIOT LAKE ON P5A 1X2

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

St. Joseph's Manor
70 Spine Road ELLIOT LAKE ON P5A 1X2

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

LISA MOORE (613), JENNIFER LAURICELLA (542)

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): January 8 - 11, 2019.

The following complaints were inspected during this inspection:

One Follow up related to compliance order # 001 under s. 8. (1) (a) (b) of the LTCHA, issued during inspection #2018_615638_0002 related to ensuring that there was an organized program of personal support services for the home to meet the assessed needs of the residents.

One Follow up related to compliance order # 002 under s. 8. (4) of the LTCHA, issued during inspection #2018_615638_0002 related to ensuring that the Administrator/Director of Care was not considered to be a registered nurse while working in the capacity of an Administrator or Director of Care.

A concurrent Complaint Inspection #2019_776613_0002, Critical Incident Inspection #2019_776613_0004 and an Other Inspection #2019_776613_0005 were also conducted during this inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator/Director of Care (ADM/DOC), Human Resources, and Registered Nurses (RNs).

The Inspector conducted daily tours of resident care areas, observed the provisions of care services to residents, observed staff to resident interactions, reviewed staff schedules, and a copy of the home's "recruitment/retention report".

**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)

0 CO(s)

0 DR(s)

0 WAO(s)



The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
LTCHA, 2007 S.O. 2007, c.8 s. 8. (1)	CO #001	2018_615638_0002		542
LTCHA, 2007 S.O. 2007, c.8 s. 8. (4)	CO #002	2018_615638_0002		542



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Légende
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	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).	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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. 101. Conditions of licence

Specifically failed to comply with the following:

s. 101. (1) A licence is subject to the conditions, if any, that are provided for in the regulations. 2007, c. 8, s. 101. (1).

Findings/Faits saillants :



1. The licensee has failed to ensure that they complied with this Act, the Local Health System Integration Act, 2006, the Commitment to the Future of Medicare Act, 2004, the regulations, and every directive issued, order made or agreement entered into under this Act and those Acts.

The licensee was to be compliant with Compliance Order (CO) #001 from Inspection #2018_615638_0002 that was issued to the home on March 1, 2018. The compliance due date was June 29, 2018.

The licensee was ordered to ensure that they were compliant with section 8 (1) (b) of the LTCHA 2007.

Specifically the licensee was ordered to:

1. Develop and implement a process to ensure that resident call bells are answered and resident needs are met in a timely manner, regardless of staffing levels within the home.
2. Audit the home's call bell wait times, to ensure that residents' needs are being met in a timely manner.
3. Evaluate the home's staffing plan on a regular basis, according to section 31 (3) of the Ontario Regulation 79/10, to address staffing shortages in order to ensure that there is an organized program of personal support services for the home that meets the assessed needs of the residents.

While the licensee complied with 1 and 3, they failed to comply with auditing the home's call bell wait times, to ensure that residents' needs were being met in a timely manner.

Inspector #542 interviewed the Administrator/Director of Care regarding CO #001. They indicated that the home had upgraded their previous call bell system; however, they started to audit the call bell wait times on January 7, 2019, seven months after the compliance due date. [s. 101. (1)]



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Issued on this 18th day of January, 2019

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

Original report signed by the inspector.