

Ministry of Long-Term Care

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

North District

159 Cedar St, Suite 403
Sudbury, ON, P3E 6A5
Telephone: (800) 663-6965

Original Public Report

Report Issue Date: October 25, 2024
Inspection Number: 2024-1397-0006
Inspection Type: Complaint Critical Incident Follow up
Licensee: St. Joseph's Health Centre of Sudbury
Long Term Care Home and City: St. Joseph's Villa, Sudbury, Sudbury

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): October 21 - 25, 2024.
The following intake(s) were inspected:

- An intake related to a COVID-19 Outbreak.
- Two intakes related to alleged sexual abuse of a resident by a resident.
- An intake related to a second follow-up for Order #002 from Inspection #2024-1397-0003 related to O. Reg. 246/22, s. 11 (1) (b).
- An intake related to a follow-up for Order #001 from Inspection #2024-1397-0005 related to O. Reg. 246/22, s. 102 (11).
- An intake related to a complainant re: discharge of resident and management of responsive behaviours.
- An intake related to a complainant re: care of a resident.
- An intake related to a complainant re: falls prevention and plan of care.
- An intake related to an unexpected death of a resident.

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Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2024-1397-0003 related to O. Reg. 246/22, s. 11 (1) (b)

Order #001 from Inspection #2024-1397-0005 related to O. Reg. 246/22, s. 102 (1) (a)

The following **Inspection Protocols** were used during this inspection:

- Resident Care and Support Services
- Food, Nutrition and Hydration
- Infection Prevention and Control
- Responsive Behaviours
- Reporting and Complaints
- Falls Prevention and Management
- Admission, Absences and Discharge

INSPECTION RESULTS

WRITTEN NOTIFICATION: Documentation

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 6 (9) 1.

Plan of care

s. 6 (9) The licensee shall ensure that the following are documented:

1. The provision of the care set out in the plan of care.

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The licensee failed to ensure that a resident had an intervention related to monitoring, documented as per the resident's plan of care.

Sources: Review of an email from the Director of Care (DOC) and staff schedules; and an interview with the Acting Director of Care (ADOC).

WRITTEN NOTIFICATION: Complaints Procedure

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 26 (1) (c)

Complaints procedure — licensee

s. 26 (1) Every licensee of a long-term care home shall,

(c) immediately forward to the Director any written complaint that it receives concerning the care of a resident or the operation of a long-term care home in the manner set out in the regulations, where the complaint has been submitted in the format provided for in the regulations and complies with any other requirements that may be provided for in the regulations.

The licensee failed to immediately forward a written complaint to the Director, when they received two separate written complaints.

Sources: Review of written complaints and Critical incident report; and an interview with the ADOC.

WRITTEN NOTIFICATION: Nutritional Care and Hydration Programs

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

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Non-compliance with: O. Reg. 246/22, s. 74 (2) (d)

Nutritional care and hydration programs

s. 74 (2) Every licensee of a long-term care home shall ensure that the programs include,

(d) a system to monitor and evaluate the food and fluid intake of residents with identified risks related to nutrition and hydration; and

Every licensee of a long-term care home shall ensure that the following interdisciplinary programs are developed and implemented in the home:

1. Nutritional Care and Hydration Programs

The licensee has failed to comply with the home's nutrition program related to food and fluid documentation, for a resident.

In accordance with O. Reg 246/22 s. 11 (1) (b), the licensee is required to ensure that written policies and protocols were developed for the nutrition and hydration program and ensure they are complied with.

Specifically, staff did not comply with the licensee's "Nutrition" policy, when they did not document a resident's, supplement at nourishment pass.

Sources: Review of resident's Point of Care documentation; Home's policy "Nutrition", last reviewed December 15, 2023, and interview with the Acting Director of Care.

WRITTEN NOTIFICATION: Reporting and Complaints

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 108 (2) (c)

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Dealing with complaints

s. 108 (2) The licensee shall ensure that a documented record is kept in the home that includes,

(c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;

The licensee failed to ensure that audits were conducted and documented for a resident's falls and oral care as identified in the letter to the family.

Sources: Review of a letter to family of a resident; and interview with the Acting DOC.

NOTICE OF RE-INSPECTION FEE Pursuant to section 348 of O. Reg. 246/22 of the Fixing Long-Term Care Act, 2021, the licensee is subject to a re-inspection fee of \$500.00 to be paid within 30 days from the date of the invoice.

A re-inspection fee applies since this is, at minimum, the second follow-up inspection to determine compliance with the following Compliance Order(s) under s. 155 of the FLTCA, 2021, and/or s. 153 of the LTCHA, 2007.

Follow-up #002 for compliance order #001 from Inspection #2024-1397-0003 related to O. Reg. 246/22, s. 11 (1) (b).

Licensees must not pay a Re-Inspection Fee from a resident-care funding envelope provided by the Ministry (i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)). By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the Re-Inspection Fee.