



**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 sous la
Loi de 2007 sur les foyers de
soins de longue durée**

**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
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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
Aug 7, 2015	2015_450138_0008	O-002461-15, O-002362-15, AND O-001719-15	Complaint

Licensee/Titulaire de permis

The Corporations of the United Counties of Leeds and Grenville, the City of Brockville, the Town of Gananoque and the Town of Prescott
c/o St. Lawrence Lodge 1803 County Road 2 BROCKVILLE ON K6V 5T1

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

ST. LAWRENCE LODGE
1803 County Road, #2 East Postal Bag #1130 BROCKVILLE ON K6V 5T1

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

PAULA MACDONALD (138)

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): August 6 and 7, 2015.

During the course of the inspection, the inspector(s) spoke with the Director of Care, a Community Care Access Centre (CCAC) Case Worker, Dietary Aides, Personal Support Workers, Registered Practical Nurses, and several Residents.

While in the home, the inspector also reviewed Resident Council Minutes, observed a morning fluid pass, observed a lunch meal service, and reviewed the home's resident weight report.

The following Inspection Protocols were used during this inspection:

Dignity, Choice and Privacy

Dining Observation

Snack Observation

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)



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
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. 44. Authorization for admission to a home

Specifically failed to comply with the following:

- s. 44. (7) The appropriate placement co-ordinator shall give the licensee of each selected home copies of the assessments and information that were required to have been taken into account, under subsection 43 (6), and the licensee shall review the assessments and information and shall approve the applicant's admission to the home unless,**
- (a) the home lacks the physical facilities necessary to meet the applicant's care requirements; 2007, c. 8, s. 44. (7).**
 - (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or 2007, c. 8, s. 44. (7).**
 - (c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44. (7).**

Findings/Faits saillants :

1. The licensee failed to comply with section 44.(7) (b) of the Act in that the licensee failed to approve an applicant's admission to the home unless (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care needs.

On August 6, 2015, the inspector spoke with the home's Director of Care regarding a letter sent to the Community Care Access Centre (CCAC) in June 2015, regarding the refusal of the application for Applicant #001 to the home. The Director of Care explained that Applicant #001's application to the home was not accepted because the applicant receives tube feeding. The Director of Care further stated that the home has never had a resident with tube feeding before and therefore the home lacks the nursing expertise to manage the resident's care needs.

The Director of Care confirmed to the inspector that the home has registered practical nurses and registered nurses in the home on staff 24 hours a day and also has a Registered Dietitian on staff on a regular basis. The Director of Care was not able to sufficiently demonstrate that the home lacked the nursing expertise to manage Applicant #001's care needs.

(O-002461-15) [s. 44. (7) (b)]



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Issued on this 7th day of August, 2015

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

Original report signed by the inspector.