



**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**

**Long-Term Care Homes Division
Long-Term Care Inspections Branch**

**Division des foyers de soins de
longue durée
Inspection de soins de longue durée**

Ottawa Service Area Office
347 Preston St Suite 420
OTTAWA ON K1S 3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347 rue Preston bureau 420
OTTAWA ON K1S 3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

Public Copy/Copie du public

Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jan 30, 2017	2017_552531_0001	035420-16	Resident Quality Inspection

Licensee/Titulaire de permis

MANORCARE PARTNERS
6257 Main Street Stouffville ON L4A 4J3

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

STIRLING MANOR NURSING HOME
218 EDWARD STREET P.O. BOX220 STIRLING ON K0K 3E0

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

SUSAN DONNAN (531)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Resident Quality Inspection inspection.

This inspection was conducted on the following date(s): January 5, 6, 9, 10, 11, 12, 16 and 17, 2017.

The following logs were completed concurrently :

Log #035401-16 a critical incident related to falls management.

Log #034463-16 a critical incident related to falls management

During the course of the inspection, the inspector(s) spoke with residents, resident substitute decision makers, Personal Support Workers (PSW), Registered Practical Nurses (RPN), Registered Nurses (RN), the Physiotherapist, the Resident Assessment Instrument (RAI) Coordinator, the Director of Care (DOC) and the Administrator.

The inspector reviewed residents' health care records, observed resident care and services and reviewed appropriate policies and procedures.

The following Inspection Protocols were used during this inspection:

Contenance Care and Bowel Management

Falls Prevention

Family Council

Infection Prevention and Control

Medication

Residents' Council

Skin and Wound Care

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

1 WN(s)

0 VPC(s)

1 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. 91. Resident charges



Specifically failed to comply with the following:

s. 91. (1) A licensee shall not charge a resident for anything, except in accordance with the following:

- 1. For basic accommodation, a resident shall not be charged more than the amount provided for in the regulations for the accommodation provided. 2007, c. 8, s. 91 (1).**
- 2. For preferred accommodation, a resident shall not be charged more than can be charged for basic accommodation in accordance with paragraph 1 unless the preferred accommodation was provided under an agreement, in which case the resident shall not be charged more than the amount provided for in the regulations for the accommodation provided. 2007, c. 8, s. 91 (1).**
- 3. For anything other than accommodation, a resident shall be charged only if it was provided under an agreement and shall not be charged more than the amount provided for in the regulations, or, if no amount is provided for, more than a reasonable amount. 2007, c. 8, s. 91 (1).**
- 4. Despite paragraph 3, a resident shall not be charged for anything that the regulations provide is not to be charged for. 2007, c. 8, s. 91 (1).**

Findings/Faits saillants :

1. The licensee has failed to ensure that residents were not charged for anything, except in accordance with the following: 4. Despite paragraph 3, a resident shall not be charged for anything that the regulations provide is not to be charged.

Under O.Reg 79/10, s. 245, Non-allowable resident charges, the following charges are prohibited for the purposes of paragraph 4 of subsection 91 (1) of the Act:

3. Charges for goods and services that the licensee is required to provide to residents under any agreement between the licensee and the Ministry or between the licensee and the local health integration network.

Under the Long Term Care-Service Accountability Agreement (L-SAA) Policy: LTCH Required Goods, Equipment, Supplies and Services, Date: 2010-07-01 indicated under section 2.1.12 Other Supplies and Equipment:

The licensee must provide the following goods, equipment, supplies and services to long-term care (LTC) home residents at no charge, other than the accommodation charge payable under the Long-Term Care Homes Act, 2007 (LTCHA), using the funding the



licensee receives from the Local Health Integration Network under the Local Health System Integration Act, 2006 (LHSIA) or the Minister under the LTCHA or accommodation charges received under the LTCHA. The list of the goods, equipment, supplies and services the licensee must ensure is provided to residents, where not covered under another government program, is non-exhaustive and does not include a complete list of the goods, equipment, supplies and services the licensee must ensure is provided to residents to meet the requirements under O. Reg. 79/10. The classification of an expenditure into a particular funding envelope is determined in accordance with the Ministry's policy for classifying eligible expenditures and is not reflected in the order or organization of the following list:

2.1.12 Other Supplies and Equipment

Other supplies and equipment including but not limited to:

- c. Equipment and supplies to ensure resident safety
- d. Equipment and supplies to prevent resident falls

The following non-compliance is related to Log #035401-16 (resident #025) and Log #034463-16 (resident #026)

A review of resident #025 and #026 health records indicated both residents' fall management strategies included hip protectors. Progress notes for resident #026 further indicated that RN #113 contacted the resident's POA to discuss the cost of the hip protectors. The POA did not agree to purchase the hip protector for resident #026 as the cost was a financial burden.

On January 16 and 17, 2017 RN #107, #108 and #113 were interviewed and confirmed hip protectors are a part of the fall management strategy to mitigate risk of a hip fracture. RN #108 indicated that the registered staff member completing the "falls incident report" review the current interventions and revise the interventions which could include hip protectors if not in place to minimize risk. Both RN #108 and #113 indicate that the resident/SDM are charged for hip protectors and the cost is typically in the range of \$80-90. RN #108 noted that once consent to purchase is obtained from the resident or SDM the Director of Care orders the hip protectors. Both indicated that residents have always been charged for hip protectors.

Inspector #531 reviewed a current list of residents with hip protectors as part of their fall management strategy; this included resident #022, #025, #026, #003, #007, #008, #009, #011, #014 and #018.



Resident #003's family member was interviewed and indicated that the nursing staff made a request that the hip protectors be purchased as they were part of resident #003's fall management strategy to mitigate the risk of a hip fractures. The family member advised that they were charged approximately \$88.00 for the hip protectors and noted this is very costly for residents with a fixed income.

The Director of Care (DOC) was interviewed and confirmed that hip protectors are part of the falls management strategy to mitigate risk of a hip fracture, and that the resident or their family are charged for the purchase of hip protectors. She indicated that hip protectors were ordered for two additional residents and that their names were not included in the above noted list; the DOC advised inspector #531 that these residents' would not be charged for the hip protectors.

The Administrator was interviewed and confirmed that residents have always been charged for hip protectors. She indicated that she was not aware that residents' could not be charge and that all residents' will be reviewed for reimbursement.

The decision to issue this non compliance as an order was based on the following: The severity of the non-compliance is potential for actual harm. Resident #026 and #003's family member reported this charge as being a financial burden. Resident #003's family member indicated they felt obligated to provide them as a means of preventing injury to their loved one.

The scope of the non-compliance is widespread: According to the registered staff, the DOC and the Administrator residents wearing hip protectors in the home are being charged for them. [s. 91. (1) 1.]

Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".



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Issued on this 30th day of January, 2017

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

Original report signed by the inspector.



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Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007, S.O. 2007, c.8*

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
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Inspection de soins de longue durée**

Public Copy/Copie du public

Name of Inspector (ID #) /

Nom de l'inspecteur (No) : SUSAN DONNAN (531)

Inspection No. /

No de l'inspection : 2017_552531_0001

Log No. /

Registre no: 035420-16

Type of Inspection /

Genre

d'inspection:

Resident Quality Inspection

Report Date(s) /

Date(s) du Rapport : Jan 30, 2017

Licensee /

Titulaire de permis :

MANORCARE PARTNERS
6257 Main Street, Stouffville, ON, L4A-4J3

LTC Home /

Foyer de SLD :

STIRLING MANOR NURSING HOME
218 EDWARD STREET, P.O. BOX220, STIRLING, ON,
K0K-3E0

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur :

Charmaine Jordan

To MANORCARE PARTNERS, you are hereby required to comply with the following order(s) by the date(s) set out below:

Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007, S.O. 2007, c.8*

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée, L.O. 2007, chap. 8*

Order # /

Ordre no : 001

Order Type /

Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 91. (1) A licensee shall not charge a resident for anything, except in accordance with the following:

1. For basic accommodation, a resident shall not be charged more than the amount provided for in the regulations for the accommodation provided.
2. For preferred accommodation, a resident shall not be charged more than can be charged for basic accommodation in accordance with paragraph 1 unless the preferred accommodation was provided under an agreement, in which case the resident shall not be charged more than the amount provided for in the regulations for the accommodation provided.
3. For anything other than accommodation, a resident shall be charged only if it was provided under an agreement and shall not be charged more than the amount provided for in the regulations, or, if no amount is provided for, more than a reasonable amount.
4. Despite paragraph 3, a resident shall not be charged for anything that the regulations provide is not to be charged for. 2007, c. 8, s. 91 (1).

Order / Ordre :

The licensee is hereby ordered to:

1. Immediately stop charging residents or the resident's substitute decision makers (SDM) for hip protectors.
2. The licensee shall review any and all residents who are currently and/or have previously been charged for hip protectors and reimburse the resident and/or resident's SDM for those charges.

Grounds / Motifs :

1. 1. The licensee has failed to ensure that residents were not charged for anything, except in accordance with the following: 4. Despite paragraph 3, a resident shall not be charged for anything that the regulations provide is not to be charged.

Under O.Reg 79/10, s. 245, Non-allowable resident charges, the following charges are prohibited for the purposes of paragraph 4 of subsection 91 (1) of



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Pursuant to section 153 and/or
section 154 of the *Long-Term Care
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the Act:

3. Charges for goods and services that the licensee is required to provide to residents under any agreement between the licensee and the Ministry or between the licensee and the local health integration network.

Under the Long Term Care-Service Accountability Agreement (L-SAA) Policy: LTCH Required Goods, Equipment, Supplies and Services, Date: 2010-07-01 indicated under section 2.1.12 Other Supplies and Equipment:

The licensee must provide the following goods, equipment, supplies and services to long-term care (LTC) home residents at no charge, other than the accommodation charge payable under the Long-Term Care Homes Act, 2007 (LTCHA), using the funding the licensee receives from the Local Health Integration Network under the Local Health System Integration Act, 2006 (LHSIA) or the Minister under the LTCHA or accommodation charges received under the LTCHA. The list of the goods, equipment, supplies and services the licensee must ensure is provided to residents, where not covered under another government program, is non-exhaustive and does not include a complete list of the goods, equipment, supplies and services the licensee must ensure is provided to residents to meet the requirements under O. Reg. 79/10. The classification of an expenditure into a particular funding envelope is determined in accordance with the Ministry's policy for classifying eligible expenditures and is not reflected in the order or organization of the following list:

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On January 16 and 17, 2017 RN #107, #108 and #113 were interviewed and

confirmed hip protectors are a part of the fall management strategy to mitigate risk of a hip fracture. RN #108 indicated that the registered staff member completing the "falls incident report" review the current interventions and revise the interventions which could include hip protectors if not in place to minimize risk. Both RN #108 and #113 indicate that the resident/SDM are charged for hip protectors and the cost is typically in the range of \$80-90. RN #108 noted that once consent to purchase is obtained from the resident or SDM the Director of Care orders the hip protectors. Both indicated that residents have always been charged for for hip protectors.

Inspector #531 reviewed a current list of residents with hip protectors as part of their fall management strategy; this included resident #022, #025, #026, #003, #007, #008, #009, #011, #014 and #018.

Resident #003's family member was interviewed and indicated that the nursing staff made a request that the hip protectors be purchased as they were part of resident #003's fall management strategy to mitigate the risk of a hip fractures. The family member advised that they were charged approximately \$88.00 for the hip protectors and noted this is very costly for residents with a fixed income.

The Director of Care (DOC) was interviewed and confirmed that hip protectors are part of the falls management strategy to mitigate risk of a hip fracture, and that the resident or their family are charged for the purchase of hip protectors. She indicated that hip protectors were ordered for two additional residents and that their names were not included in the above noted list; the DOC advised inspector #531 that these residents' would not be charged for the hip protectors.

The Administrator was interviewed and confirmed that residents have always been charged for hip protectors. She indicated that she was not aware that residents' could not be charge and that all residents' will be reviewed for reimbursement.

The decision to issue this non compliance as an order was based on the following:

The severity of the non-compliance is potential for actual harm. Resident #026 and #003's family member reported this charge as being a financial burden. Resident #003's family member indicated they felt obligated to provide them as a means of preventing injury to their loved one.

The scope of the non-compliance is widespread: According to the registered



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de soins de longue durée, L.O. 2007, chap. 8*

staff, the DOC and the Administrator residents wearing hip protectors in the home are being charged for them. (531)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Feb 23, 2017



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REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603



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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the Director

Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.



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RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

La demande de réexamen doit être présentée par écrit et est signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au titulaire de permis.

La demande de réexamen doit contenir ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le titulaire de permis souhaite que le directeur examine;
- c) l'adresse du titulaire de permis aux fins de signification.

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur
a/s Coordinateur des appels
Inspection de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



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En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Inspection de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this 30th day of January, 2017

Signature of Inspector /

Signature de l'inspecteur :

Name of Inspector /

Nom de l'inspecteur : Susan Donnan

Service Area Office /

Bureau régional de services : Ottawa Service Area Office