

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

Central West Service Area Office
1st Floor, 609 Kumpf Drive
WATERLOO ON N2V 1K8
Telephone: (888) 432-7901
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Bureau régional de services de Centre
Ouest
1e étage, 609 rue Kumpf
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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
Aug 27, 2019	2019_798738_0014	011106-18, 015219- 18, 017681-18, 025379-18, 025380- 18, 014135-19	Follow up

Licensee/Titulaire de permis

Revera Long Term Care Inc.
5015 Spectrum Way, Suite 600 MISSISSAUGA ON L4W 0E4

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

Trillium Court
550 Philip Place KINCARDINE ON N2Z 3A6

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

AMANDA OWEN (738), JANETM EVANS (659)

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): July 24-26 and 29-30, 2019.

The following intakes were completed in this Follow up inspection:

Log #025379-18 was related to Compliance Order (CO) #001 from inspection #2018_755728_0001 and bathing; Log #025380-18 was related to CO #002 from inspection #2018_755728_0001 and admissions; Log #011106-18, Critical Incident System (CIS) #2773-000007-18, Log #015219-18, CIS #2773-000009-18, and Log #017681-18, CIS #2773-000010-18 were related to falls prevention; and Log #014135-19, CIS #2773-000010-19 was related to falls prevention and hospitalization and change in condition.

During the course of the inspection, the inspector(s) spoke with the Executive Director (ED), Director of Care (DOC), Program Manager, Office Manager, Care Coordinator at the South West Local Health Integration Network, Registered Nurses (RN), Registered Practical Nurses (RPN) and Personal Support Workers (PSW).

The inspector(s) also toured the home, observed resident care provision, reviewed residents' clinical records and relevant internal records.

The following Inspection Protocols were used during this inspection:

Admission and Discharge

Falls Prevention

Hospitalization and Change in Condition

Personal Support Services

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)

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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 NO DE L'INSPECTEUR
O.Reg 79/10 s. 33. (1)	CO #001	2018_755728_0001	738

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. 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 has failed to take into account the assessments and information under subsection 43 (6) and approve the applicants' admission to the home unless:

(a) the home lacked the physical facilities necessary to meet the applicants' care requirements;

(b) the staff of the home lacked the nursing expertise necessary to meet the applicants' care requirements; or

(c) circumstances existed which were provided for in the regulations as being a ground for withholding approval.

A) On a specified date, Trillium Court Seniors Community received a referral from the South West Local Health Integration Network (SWLHIN) regarding applicant #007's application for admission to the home. At the time of the referral, the applicant was residing in a retirement home.

A Behavioural Assessment Tool (BAT) was completed for applicant#007 on a specified date and it identified that the applicant displayed multiple responsive behaviours.

DOC #100 said that applicant #007's application to the home was declined because the

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home lacked the physical facilities necessary for care. They said that the applicant had specified responsive behaviours. They felt that the applicant posed a risk to themselves and others and that staff would not be able to deal with those behaviours.

On a specified date, the home sent a letter to the applicant stating that they were withholding admission because the home lacked the physical facilities necessary for care and the resident had specified responsive behaviours. The letter further stated that the home's staff to resident ratio would not provide the required complement to meet their needs.

B) On a specified date, Trillium Court Seniors Community received a referral from the SWLHIN regarding applicant #008's application for admission to the home. At the time of the referral, the applicant was residing in a retirement home, where they were having challenges caring for the applicant due to their responsive behaviours.

A BAT was completed for applicant #008 on a specified date and it identified that the applicant displayed multiple responsive behaviours.

DOC #100 said that applicant #008's application to the home was declined because the home lacked the physical facilities necessary for care. They said that the applicant had specified responsive behaviours that the home would not be able to manage.

On a specified date, the home sent a letter to the applicant stating that they were withholding admission because the home lacked the physical facilities necessary for care and the home's staff to resident ratio would not support the required intervention that could be necessary to meet their needs.

The inspector identified that the home had access to High Intensity Needs funding from the Ministry of Long Term Care but was not using it for residents with responsive behaviours at the time of the inspection. The home had internal and external Behavioural Support Ontario teams, use of wander guard banners to deter residents from wandering into other resident rooms, a Wander Guard alarm system and signage at the entrance of the LTC home unit, advising visitors to ensure they closed the door behind them for the safety of residents. This does not support the home's conclusion that it does not have the physical facilities necessary for care of the specified applicants.

The licensee has failed to ensure that there was sufficient evidence to validate refusal of applicant #007 and #008's applications for admission to the home. [s. 44. (7)]

Additional Required Actions:

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

Issued on this 28th day of August, 2019

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

Original report signed by the inspector.

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

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

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

Public Copy/Copie du public

Name of Inspector (ID #) /

Nom de l'inspecteur (No) : AMANDA OWEN (738), JANETM EVANS (659)

Inspection No. /

No de l'inspection : 2019_798738_0014

Log No. /

No de registre : 011106-18, 015219-18, 017681-18, 025379-18, 025380-18, 014135-19

Type of Inspection /

Genre d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : Aug 27, 2019

Licensee /

Titulaire de permis : Revera Long Term Care Inc.
5015 Spectrum Way, Suite 600, MISSISSAUGA, ON,
L4W-0E4

LTC Home /

Foyer de SLD : Trillium Court
550 Philip Place, KINCARDINE, ON, N2Z-3A6

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur : Deborah Kraft

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

To Revera Long Term Care Inc., you are hereby required to comply with the following
order(s) by the date(s) set out below:

Order(s) of the Inspector

Ordre(s) de l'inspecteur

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

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)

Linked to Existing Order / 2018_755728_0001, CO #002;
Lien vers ordre existant:

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, 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;
(b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or
(c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44. (7).

Order / Ordre :

The licensee must be compliant with s. 44 (7) of the LTCHA.

Specifically the licensee must:

- a) Contact the placement coordinator at the appropriate Local Health Integration Network to request the most recent assessments for applicants #007 and #008, if they are still choosing admission to Trillium Court Seniors Community.
- b) Review the most recent assessments mentioned in a) and not withhold admission for applicants #007 and #008 unless as specified by the legislation.

Grounds / Motifs :

1. The licensee has failed to comply with compliance order (CO) #002 from inspection #2018_755728_0001 issued on August 13, 2018, with a compliance due date of September 21, 2018.

The licensee was ordered to:

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

The licensee must be compliant with s. 44 (7) of the LTCHA. Specifically, the licensee must:

- a) review the admission applications for applicants #040 and #041, if they remain on the waiting list and approve the applicants admission unless: (a) the home lacks the physical facilities necessary to meet the applicant's care requirements; (b) the staff at the home lack the nursing expertise necessary to meet the applicant's care requirements; or, (c) circumstances exist which are provided for in the regulations as being a ground for withholding approval;
- b) review the admission applications for any other applicant and approve the applicants admission unless: (a) the home lacks the physical facilities necessary to meet the applicant's care requirements; (b) the staff at the home lack the nursing expertise necessary to meet the applicant's care requirements; or, (c) circumstances exist which are provided for in the regulations as being a ground for withholding approval.

The licensee completed step a) from the order.

The licensee failed to complete step b) from the order.

The licensee has failed to take into account the assessments and information under subsection 43 (6) and approve the applicants' admission to the home unless:

- (a) the home lacked the physical facilities necessary to meet the applicants' care requirements;
- (b) the staff of the home lacked the nursing expertise necessary to meet the applicants' care requirements; or
- (c) circumstances existed which were provided for in the regulations as being a ground for withholding approval.

A) On a specified date, Trillium Court Seniors Community received a referral from the South West Local Health Integration Network (SWLHIN) regarding applicant #007's application for admission to the home. At the time of the referral, the applicant was residing in a retirement home.

Order(s) of the Inspector

Pursuant to section 153 and/or
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2007, c. 8

Ordre(s) de l'inspecteur

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l'article 154 de la *Loi de 2007 sur les
foyers de soins de longue durée*, L.
O. 2007, chap. 8

A Behavioural Assessment Tool (BAT) was completed for applicant#007 on a specified date and it identified that the applicant displayed multiple responsive behaviours.

DOC #100 said that applicant #007's application to the home was declined because the home lacked the physical facilities necessary for care. They said that the applicant had specified responsive behaviours. They felt that the applicant posed a risk to themselves and others and that staff would not be able to deal with those behaviours.

On a specified date, the home sent a letter to the applicant stating that they were withholding admission because the home lacked the physical facilities necessary for care and the resident had specified responsive behaviours. The letter further stated that the home's staff to resident ratio would not provide the required complement to meet their needs.

B) On a specified date, Trillium Court Seniors Community received a referral from the SWLHIN regarding applicant #008's application for admission to the home. At the time of the referral, the applicant was residing in a retirement home, where they were having challenges caring for the applicant due to their responsive behaviours.

A BAT was completed for applicant#008 on a specified date and it identified that the applicant displayed multiple responsive behaviours.

DOC #100 said that applicant #008's application to the home was declined because the home lacked the physical facilities necessary for care. They said that the applicant had specified responsive behaviours that the home would not be able to manage.

On a specified date, the home sent a letter to the applicant stating that they were withholding admission because the home lacked the physical facilities necessary for care and the home's staff to resident ratio would not support the required intervention that could be necessary to meet their needs.

The inspector identified that the home had access to High Intensity Needs funding from the Ministry of Long Term Care but was not using it for residents

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

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l'article 154 de la *Loi de 2007 sur les
foyers de soins de longue durée*, L.
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with responsive behaviours at the time of the inspection. The home had internal and external Behavioural Support Ontario teams, use of wander guard banners to deter residents from wandering into other resident rooms, a Wander Guard alarm system and signage at the entrance of the LTC home unit, advising visitors to ensure they closed the door behind them for the safety of residents. This does not support the home's conclusion that it does not have the physical facilities necessary for care of the specified applicants.

The licensee has failed to ensure that there was sufficient evidence to validate refusal of applicant #007 and #008's applications for admission to the home. [s. 44. (7)]

The severity of the issue was determined to be a level 2 as there was minimal harm/risk to the applicants. The scope of the issue was a level 2 as it related to two out of three applicants reviewed. The home had a level 4 history of on-going non-compliance with this section of the Act that included:

- Compliance Order (CO) #002 issued on August 13, 2018 (2018_755728_0001) (738)

**This order must be complied with by /
Vous devez vous conformer à cet ordre d'ici le :**

Oct 07, 2019

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

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, commercial courier 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

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing, when service is made by a commercial courier it is deemed to be made on the second business day after the day the courier receives the document, 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:

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

Health Services Appeal and Review Board and the Director

Attention Registrar
Health Services Appeal and Review Board
151 Bloor Street West, 9th Floor
Toronto, ON M5S 1S4

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.

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

**RENSEIGNEMENTS RELATIFS AUX RÉEXAMENS DE DÉCISION ET AUX
APPELS**

PRENEZ AVIS :

Le/la titulaire de permis a le droit de faire une demande de réexamen par le directeur de cet ordre ou de ces ordres, et de demander que le directeur suspende cet ordre ou ces ordres conformément à l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée.

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

La demande écrite doit comporter ce qui suit :

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

La demande de réexamen présentée par écrit doit être signifiée en personne, par courrier recommandé, par messagerie commerciale ou par télécopieur, au :

Directeur
a/s du coordonnateur/de la coordonnatrice en matière d'appels
Direction de l'inspection des foyers de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Toronto ON M5S 2B1
Télécopieur : 416-327-7603

Order(s) of the Inspector**Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or
section 154 of the *Long-Term
Care Homes Act, 2007*, S.O.
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foyers de soins de longue durée*, L.
O. 2007, chap. 8

Quand la signification est faite par courrier recommandé, elle est réputée être faite le cinquième jour qui suit le jour de l'envoi, quand la signification est faite par messagerie commerciale, elle est réputée être faite le deuxième jour ouvrable après le jour où la messagerie reçoit le document, et lorsque la signification est faite par télécopieur, elle est réputée être faite le premier jour ouvrable qui suit le jour de l'envoi de la télécopie. Si un avis écrit de la décision du directeur n'est pas signifié au/à la titulaire de permis dans les 28 jours de la réception de la demande de réexamen présentée par le/la titulaire de permis, cet ordre ou ces ordres sont réputés être confirmés par le directeur, et le/la titulaire de permis est réputé(e) avoir reçu une copie de la décision en question à l'expiration de ce délai.

Le/la titulaire de permis a le droit d'interjeter appel devant la Commission d'appel et de révision des services de santé (CARSS) de la décision du directeur relative à une demande de réexamen d'un ordre ou des ordres d'un inspecteur ou d'une inspectrice conformément à l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée. La CARSS est un tribunal autonome qui n'a pas de lien avec le ministère. Elle est créée par la loi pour examiner les questions relatives aux services de santé. Si le/la titulaire décide de faire une demande d'audience, il ou elle doit, dans les 28 jours de la signification de l'avis de la décision du directeur, donner par écrit un avis d'appel à la fois à :

la Commission d'appel et de révision des services de santé et au directeur

À l'attention du/de la registrateur(e)
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto ON M5S 1S4

Directeur
a/s du coordonnateur/de la coordonnatrice en matière
d'appels
Direction de l'inspection des foyers de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Toronto ON M5S 2B1
Télécopieur : 416-327-7603

À la réception de votre avis d'appel, la CARSS en accusera réception et fournira des instructions relatives au processus d'appel. Le/la titulaire de permis peut en savoir davantage sur la CARSS sur le site Web www.hsarb.on.ca.

Issued on this 27th day of August, 2019

Signature of Inspector /

Signature de l'inspecteur :

Name of Inspector /

Nom de l'inspecteur : Amanda Owen

Service Area Office /

Bureau régional de services : Central West Service Area Office