



**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**

Hamilton Service Area Office
119 King Street West 11th Floor
HAMILTON ON L8P 4Y7
Telephone: (905) 546-8294
Facsimile: (905) 546-8255

Bureau régional de services de
Hamilton
119 rue King Ouest 11^{ième} étage
HAMILTON ON L8P 4Y7
Téléphone: (905) 546-8294
Télécopieur: (905) 546-8255

Amended Public Copy/Copie modifiée 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 |
|---|--|----------------------------------|--|
| May 30, 2019 | 2019_570528_0008 (A1) | 022933-18, 022956-18 | 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

Brierwood Gardens
425 Park Road North BRANTFORD ON N3R 7G5

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

Amended by CYNTHIA DITOMASSO (528) - (A1)

Amended Inspection Summary/Résumé de l'inspection modifié



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durée***

CO extension request.

Issued on this 30th day of May, 2019 (A1)

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

Original report signed by the inspector.



**Ministry of Health and
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425 Park Road North BRANTFORD ON N3R 7G5

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

Amended by CYNTHIA DITOMASSO (528) - (A1)

Amended Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): February 28, 2019 and March 1, 4, 5, 6, 2019.

This inspection included the following:

Log #022933-18 related to plan of care

Log #022956-18 related to 24 hour registered nurse

This inspection was completed concurrently with Critical Incident Inspection #2019_570528_0007

LTC Home Inspector Emmy Hartmann #748 was present during the inspection

During the course of the inspection, the inspector(s) spoke with the Executive Director, the Director of Care, the Assistant Director of Care, registered nurses, registered practical nurses, personal support workers, residents and families.

During the course of the inspection, the inspector(s) observed the provision of care, reviewed documents including medical records, investigation notes, meeting minutes, staffing schedules, policies and procedures.

The following Inspection Protocols were used during this inspection:



**Falls Prevention
Sufficient Staffing**

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

- 1 WN(s)
- 0 VPC(s)
- 1 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 # / NO DE L'INSPECTION | INSPECTOR ID #/ NO DE L'INSPECTEUR |
|--|------------------------------------|--------------------------------------|---------------------------------------|
| LTCHA, 2007 S.O. 2007, c.8 s. 6. (10) | CO #001 | 2018_555506_0019 | 528 |



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

| | |
|---|---|
| <p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p> | <p>Légende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p> |
| <p>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.)</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p> | <p>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.)</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p> |

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 8. Nursing and personal support services

Specifically failed to comply with the following:

s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

Findings/Faits saillants :

1. The licensee failed to ensure that there was at least one registered nurse who was an employee of the licensee and a member of the regular nursing staff on duty and present at all times unless there was an allowable exception to this requirement (see definition/description for list of exceptions as stated in section 45.(1) and 45.1 of the regulation).



In this section "regular nursing staff" means a member of the registered nursing staff who works in a long-term care home at fixed or prearranged intervals

Review of follow up intake #022956-18, which outlined a Compliance Order (CO) (#2018_555506_0019) issued in August 2018, for section 8(3) of the LTCHA, with a compliance date of October 31, 2018.

Review of the staffing complement from November 2018 to March 2019, identified that registered nurses (RN) worked the following shift:

- i. Days 0630 to 1430 hours
- ii. Evenings 1430 to 2230 hours
- iii. Nights 2230 to 0630 hours

In addition, there was a full time RN scheduled full time days, from 0800 to 1600 hours.

Review of the RN staffing schedule and interview with DOC #100 in March 2019:

- i. In November 2018, the part time evening registered nurse did not work their scheduled shift on one occasion, and was replaced with a registered practical nurse (RPN).
- ii. In December 2018, the night shift registered nurse called in sick and did not work their scheduled shift on one occasion. A RPN was scheduled as replacement with the RN on call.
- iii. In January 2019, day shift staff called in sick and was replaced with a RPN on two occasions. The home was unable to fill registered staff evening shifts on eleven occasions. In addition, four scheduled registered nurse night shifts were replaced with registered practical nurses, due to a part time registered nurse resigning.
- iv. In February 2019, the home continued to have RN shortages on two occasions on evening shifts and eight occasions on night shifts.

Interview with DOC #100 in March 2019, confirmed that after the initial order was received, the home had hired one registered nurse; however, had two regular registered nurses leave January 2019. The DOC confirmed that the home's current registered nursing pool includes three full time and two part time registered nurses and that the home continued to utilize an additional full time, 'ministry funded' registered nurse. The DOC confirmed that the home did not have a registered nurse to fill a part time night shift schedule and there was no casual staff to cover sick calls or vacation.



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The DOC confirmed that recruitment strategies were ongoing by the home. [s. 8.
(3)]

Additional Required Actions:

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

(A1)

The following order(s) have been amended: CO# 001

Issued on this 30th day of May, 2019 (A1)

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

Original report signed by the inspector.



**Ministry of Health and
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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
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L. O. 2007, chap. 8

Long-Term Care Homes Division
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Inspection de soins de longue durée

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**Name of Inspector (ID #) /
Nom de l'inspecteur (No) :** Amended by CYNTHIA DITOMASSO (528) - (A1)

**Inspection No. /
No de l'inspection :** 2019_570528_0008 (A1)

**Appeal/Dir# /
Appel/Dir#:**

**Log No. /
No de registre :** 022933-18, 022956-18 (A1)

**Type of Inspection /
Genre d'inspection :** Follow up

**Report Date(s) /
Date(s) du Rapport :** May 30, 2019(A1)

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

**LTC Home /
Foyer de SLD :** Brierwood Gardens
425 Park Road North, BRANTFORD, ON, N3R-7G5

**Name of Administrator /
Nom de l'administratrice
ou de l'administrateur :** Brenda Nadeau



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l'article 154 de la *Loi de 2007 sur les
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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:



**Ministry of Health and
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2007, c. 8

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

Order # / **Order Type /**
Ordre no : 001 **Genre d'ordre :** Compliance Orders, s. 153. (1) (b)
Linked to Existing Order / 2018_555506_0019, CO #002;
Lien vers ordre existant:

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

Order / Ordre :



**Ministry of Health and
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Aux termes de l'article 153 et/ou de
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L. O. 2007, chap. 8

The licensee has failed to comply with the following compliance order
CO#002 from inspection #2018_555506_0019 issued on August 22, 2017,
with a compliance date of October 31, 2018.

The licensee must be compliant with LTCHA s.8 (3).

The licensee shall prepare, submit and implement a plan to ensure that at
least one registered nurse who is both an employee of the licensee and a
member of the regular nursing staff of the home is on duty and present in the
home at all times, except as provided for in the regulations.

The plan must include, but is not limited, to the following:

- i. a documented review of the current registered nurse schedule
- ii. recruitment and retention strategies
- iii. a documented log of RN shortages

Please submit the written plan, quoting log number [FUI
#2019_570528_0008] and inspector Cynthia Di Tomasso by email to [
HamiltonSAO.MOH@ontario.ca by April 5, 2019.

Please ensure that the submitted written plan does not contain any PI/PHI.
Check with your SAO regarding the delivery email address

Grounds / Motifs :

1. The licensee has failed to comply with compliance order #002 from inspection
2018_555506_0019 issued on August 20, 2018 with a compliance date of October
31, 2018.

The licensee was ordered to

1. Review the licensee's access to Registered Nurses (RNs) that are employee's of
the licensee and members of the regular nursing staff of the home to ensure there
are enough RNs to meet the licensee's staffing needs and allow for absences such
as illness and vacation coverage and implement recruitment strategies.
2. Ensure that a RN who is an employee of the home is scheduled to work in the
home and on duty and present at all times except as provided for in the regulation.

Since the initial order was received, the home had hired one registered nurse in



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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

October 2018; however, had two regular registered nurses resign in January 2019.

1. The licensee failed to ensure that there was at least one registered nurse who was an employee of the licensee and a member of the regular nursing staff on duty and present at all times unless there was an allowable exception to this requirement (see definition/description for list of exceptions as stated in section 45.(1) and 45.1 of the regulation).

In this section "regular nursing staff" means a member of the registered nursing staff who works in a long-term care home at fixed or prearranged intervals

Review of follow up intake #022956-18, which outlined a Compliance Order (CO) (#2018_555506_0019) issued in August 2018, for section 8(3) of the LTCHA, with a compliance date of October 31, 2018.

Review of the staffing complement from November 2018 to March 2019, identified that registered nurses (RN) worked the following shift:

- i. Days 0630 to 1430 hours
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- iii. Nights 2230 to 0630 hours

In addition, there was a full time RN scheduled full time days, from 0800 to 1600 hours.

Review of the RN staffing schedule and interview with DOC #100 in March 2019:

- i. In November 2018, the part time evening registered nurse did not work their scheduled shift on one occasion, and was replaced with a registered practical nurse (RPN).
- ii. In December 2018, the night shift registered nurse called in sick and did not work their scheduled shift on one occasion. A RPN was scheduled as replacement with the RN on call.
- iii. In January 2019, day shift staff called in sick and was replaced with a RPN on two occasions. The home was unable to fill registered staff evening shifts on eleven occasions. In addition, four scheduled registered nurse night shifts were replaced with registered practical nurses, due to a part time registered nurse resigning.
- iv. In February 2019, the home continued to have RN shortages on two occasions on evening shifts and eight occasions on night shifts.



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L. O. 2007, chap. 8

Interview with DOC #100 in March 2019, confirmed that after the initial order was received, the home had hired one registered nurse; however, had two regular registered nurses leave January 2019. The DOC confirmed that the home's current registered nursing pool includes three full time and two part time registered nurses and that the home continued to utilize an additional full time, 'ministry funded' registered nurse. The DOC confirmed that the home did not have a registered nurse to fill a part time night shift schedule and there was no casual staff to cover sick calls or vacation.

The DOC confirmed that recruitment strategies were ongoing by the home.

The severity of the issue was determined to be potential for actual harm (level 2). The scope of the issue was determined to be a pattern (level 2). Despite MOH action, the non-compliance continued with the original area of non-compliance (level 4) with a compliance order (CO) issued in August 2018 (#2018_555506_0019). (528)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Aug 16, 2019(A1)



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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, 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:



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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.



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**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



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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 30th day of May, 2019 (A1)

**Signature of Inspector /
Signature de l'inspecteur :**

**Name of Inspector /
Nom de l'inspecteur :**

Amended by CYNTHIA DITOMASSO (528) - (A1)



**Ministry of Health and
Long-Term Care**

**Ministère de la Santé et des
Soins de longue durée**

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

**Service Area Office /
Bureau régional de services :**

Hamilton Service Area Office