



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

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Jun 28, 2019	2019_526645_0006	002476-19, 007908-19	Complaint

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

Main Street Terrace
77 Main Street TORONTO ON M4E 2V6

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

DEREGE GEDA (645)

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): June 17, 18, 19, 20, 21 and 24, 2019

The following complaints with Log# 007908-19 related to withholding admission and Log# 002476-19 related to prevention of abuse and neglect and medication administration, were inspected.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Assistant Directors of Care (ADOC), Resident Assessment Instrument (RAI) Coordinators, Registered Nurses (RNs), Registered Practical Nurses (RPNs), Personal Support Workers, (PSWs), Behavioural Support Ontario (BSO), Resident Care Coordinator (RCC), Housekeeping staff and Residents.

During the course of the inspection, the inspectors performed observations of staff and resident interactions, provision of care, reviewed residents' clinical records, staff training records and relevant policies and procedures.

The following Inspection Protocols were used during this inspection:

**Admission and Discharge
Medication
Reporting and Complaints**

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

2 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)



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. 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).

s. 44. (9) If the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out,

(a) the ground or grounds on which the licensee is withholding approval; 2007, c. 8, s. 44. (9).

(b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; 2007, c. 8, s. 44. (9).

(c) an explanation of how the supporting facts justify the decision to withhold approval; and 2007, c. 8, s. 44. (9).

(d) contact information for the Director. 2007, c. 8, s. 44. (9).

Findings/Faits saillants :

1. The licensee has failed to approve an applicant's admission to the home under LTCHA, 2007, S.O., c. 8, s. 44. (7).

As outlined in LTCHA, 2007, S.O., c. 8, s. 44. (7), the licensee shall approve the applicant's admission to the home unless the home lacks the physical facilities necessary to meet the applicant's care requirements; the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or circumstances exist which are provided for in the regulations as being a ground for withholding approval.

A complaint was submitted to the Ministry of Health and Long-Term care (MOHLTC) regarding an admission denial to Main Street Terrace. The complainant told the inspector that the home denied admission to applicant #010 for a non-secure long-term care bed.



The complainant also stated that applicant #010's application was denied, because they have history of responsive behaviours.

Review of the written notice from the home, to applicant #010 revealed that the home withheld the application for admission to the long-term care bed. The written notice indicated that the grounds for withholding admission included resident's history of responsive behaviours. The written notice did not indicate the home lacks the physical facilities necessary to meet the applicant's care requirements or that the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements.

Review of Behavioural Assessment Tool that was completed by Local Health Integration Network (LHIN) placement coordinator, included in the application for admission indicated applicant #010 did not have any recent responsive behaviours.

During an interview, placement coordinator for the LHIN #112 for applicant #010 stated that applicant #010 did not require a secured unit, as they had not been identified as exit seeking and had exhibited no recent responsive behaviours.

As there was a non-compliance identified under section 44 (7), the sample was expanded. As such, three written notices for applicants #011, #012 and #013 were reviewed.

Review of the written notice from Main Street Terrace indicated the grounds for withholding admission for applicant #011 were as follows:

- the resident have various history of responsive behaviours and currently the home has a high number of residents with behaviours

Review of the written notice from Main Street Terrace indicated the grounds for withholding admission for applicant #012 were as follows:

- History of various responsive behaviours and currently the home has a high number of residents with responsive behaviours requiring constant supervision.

Review of another written notice from Main Street Terrace indicated the grounds for withholding admission for applicant #013 were as follows:

- History of various responsive behaviours and currently the home has a high number of residents with responsive behaviours requiring constant supervision.

The written notices for applicants #011, #012 and #013 did not indicate the home lacks



the physical facilities necessary to meet the applicant's care requirements or that the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements.

Interviews with the DOC #100 and RSC #101 and BSO #103 confirmed that the home has the physical facilities and the nursing expertise to meet the applicants' care requirements. They indicated that the home had both secured and non-secured units and a behavioural support program in accordance with evidence-based practices or prevailing practices. They reiterated that they accept applicants with behavioural care needs on both units and develop care interventions as needed.

Interview with the BSO lead confirmed that they follow up with several residents on the secure and non-secure units, develop behavioural management plan and educate staff members on the care needs. They also reiterated that they occasionally get involved in the admission process to assess behavioural care needs of new applicants. They indicated that in the case of applicants #010, #011, #012 and #013, they were not involved in the assessment of care needs and decisions not to admit them to the home.

During the interview, the DOC confirmed that they have BSO services, secure and non-secure units, Baycrest Geriatric Out Reach Team and appropriately trained staffing to support behaviours at the home. DOC #100 stated that the main reason the home withheld applicants #010, #011, #012 and #013 was due to the high number of residents in the home with responsive behaviours. They also indicated that new applicants have responsive behaviours and they don't feel that the home can provide care safely and protect the residents. [s. 44. (7)]

2. The licensee has failed to ensure that a detailed explanation was provided for withholding admission to the home under LTCHA, 2007, S.O., c. 8, s. 44. (9), specifically related to section b), c) and d) of the legislation.

As outlined in LTCHA, 2007, S.O., c. 8, s. 44. (9), if the licensee withholds approval for admission, a written notice should be provided setting out the grounds on which the licensee is withholding approval; a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; an explanation of how the supporting facts justify the decision to withhold approval; and contact information for the Director. 2007, c. 8, s. 44 (9).

Review of the written notice of withholding approval from the home for applicant #010



revealed that the home withheld the application for admission to the long-term care bed. The written notice indicated that the ground for withholding admission included resident's history of multiple responsive behaviours and the home has high number of residents with responsive behaviours.

Further review of the written notice revealed that the home did not include a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; an explanation of how the supporting facts justify the decision to withhold approval; and contact information for the Director.

To increase the sample size, Inspector #645 reviewed written notices for applicants #011, #012, and #013.

Review of the written notice from Main Street Terrace indicated the grounds for withholding admission for applicant #011 were as follows:

- the resident have various history of responsive behaviours and currently the home have a high number of residents with behaviours

Review of the written notice from Main Street Terrace indicated the grounds for withholding admission for applicant #012 were as follows:

- History of responsive behaviours and currently the home have a high number of residents with responsive behaviours requiring constant supervision.

Review of another written notice from Main Street Terrace indicated the grounds for withholding admission for applicant #013 were as follows:

- History of various responsive behaviours and currently the home have a high number of residents with responsive behaviours requiring constant supervision.

Review of the three written notices for the above-mentioned applicants indicated that the home did not include a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; an explanation of how the supporting facts justify the decision to withhold approval; and contact information for the Director. [s. 44. (9)]



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Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that an applicant's admission to the home is approved under LTCHA, 2007, S.O., c. 8, s. 44. (7) and a detailed explanation for withholding admission is provided under 44(9), to be implemented voluntarily.

**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 9. Doors in a home
Specifically failed to comply with the following:**

s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff. O. Reg. 79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).

Findings/Faits saillants :



1. The licensee has failed to ensure that all doors leading to non-residential areas were kept closed and locked when they were not being supervised by staff.

On June 2019, while conducting a daily tour of the home, Inspector #645 observed the shower room door on an identified floor unlocked, open and unsupervised. Inside a mechanical transferring device was noted.

During an interview with housekeeper #112, they verified that the shower room door was supposed to be kept closed and locked. They then proceeded to close and lock the door.

On the same day, the shower room door on a different home area was found wide open and unsupervised.

During an interview with RPN#113, they verified that the door to the shower room was supposed to be kept closed and locked. They then proceeded to close and lock the door.

During an interview with the DOC, they confirmed that the shower room doors on both floors should be locked at all times. [s. 9. (1) 2.]

Issued on this 2nd day of July, 2019

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

Original report signed by the inspector.