

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 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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Public Copy/Copie du public

Report Date(s) /

Dec 14, 2018

Inspection No / Date(s) du Rapport No de l'inspection

2018 728696 0010

Loa #/ No de registre

003596-18, 008351-18. 014861-18. 023999-18

Type of Inspection / **Genre d'inspection**

Complaint

Licensee/Titulaire de permis

Schlegel Villages Inc.

325 Max Becker Drive Suite, 201 KITCHENER ON N2E 4H5

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

The Village of Sandalwood Park 425 Great Lakes Drive BRAMPTON ON L6R 2W8

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

ZINNIA SHARMA (696)

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): November 16, 19, 20, 21, 22, 23, 26, 27, and 28, 2018.

During the course of the inspection, the following Complaint intakes were inspected:

Log #003596-18, related to resident to resident altercations.

Log #008351-18, related to responsive behaviours.

Log #014861-18, related to resident to resident altercations.

Log #023999-18, related to fall prevention and dining.

During the course of the inspection the inspector toured the home, observed the provision of care and services, reviewed relevant documents including but not limited to: clinical records, policies and procedures and meeting minutes, observed housekeeping practices and observed infection prevention and control practices.

During the course of the inspection, the inspector(s) spoke with residents, family members, personal support workers (PSW), security guard, agency manager, registered practical nurses (RPN), registered nurses (RN), Behavioural Support Ontario (BSO) RPN, RAI Coordinator, Kinesiologist, Occupational Therapist, Physiotherapist, Director of Nursing Care (DNC), and General Manager.

The following Inspection Protocols were used during this inspection: **Falls Prevention Nutrition and Hydration Personal Support Services** Prevention of Abuse, Neglect and Retaliation **Responsive Behaviours**

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

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)



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Legend	Légende
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.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 76. Training



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Specifically failed to comply with the following:

- s. 76. (2) Every licensee shall ensure that no person mentioned in subsection (1) performs their responsibilities before receiving training in the areas mentioned below:
- 1. The Residents' Bill of Rights. 2007, c. 8, s. 76. (2).
- 2. The long-term care home's mission statement. 2007, c. 8, s. 76. (2).
- 3. The long-term care home's policy to promote zero tolerance of abuse and neglect of residents. 2007, c. 8, s. 76. (2).
- 4. The duty under section 24 to make mandatory reports. 2007, c. 8, s. 76. (2).
- 5. The protections afforded by section 26. 2007, c. 8, s. 76. (2).
- 6. The long-term care home's policy to minimize the restraining of residents. 2007, c. 8, s. 76. (2).
- 7. Fire prevention and safety. 2007, c. 8, s. 76. (2).
- 8. Emergency and evacuation procedures. 2007, c. 8, s. 76. (2).
- 9. Infection prevention and control. 2007, c. 8, s. 76. (2).
- 10. All Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee, that are relevant to the person's responsibilities. 2007, c. 8, s. 76. (2).
- 11. Any other areas provided for in the regulations. 2007, c. 8, s. 76. (2).

Findings/Faits saillants:

- 1. The licensee failed to ensure that all staff at the home did not perform their responsibilities before receiving training in the areas mentioned below:
- 1. The Resident's Bill of Rights.
- 2. The long-term care home's mission statement.
- 3. The long-term care home's policy to promote zero tolerance of abuse and neglect of residents.
- 4. The duty under section 24 to make mandatory reports.
- 5. The protection afforded by section 26.
- 6. The long-term care home's policy to minimize the restraining of residents.
- 7. Fire prevention and safety.
- 8. Emergency and evacuation procedures.
- 9. Infection prevention and control.
- 10. All Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee that were relevant to the person's responsibilities.
- 11. Any other areas provided for in the regulations.



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During a complaint inspection, the complainant stated that the home had hired staff through an agency to provide one-to-one monitoring for a particular resident.

Staff hired through an agency stated that they had not received any training or orientation to the home prior to attending their first shift at the home.

Director of Nursing Care (DNC) stated that they had used several agency staff over a period of time for the specific resident. There were about 12 staff members that were hired through an agency between September 2017 and October 2018.

The DNC told the LTCH Inspector that there was no process in place to ensure that home specific training or orientation was provided to agency staff prior to their first shift at the home. When the agency personnel attended the home for the first time, a registered staff oriented them to the home area and the resident. There was no further formal training or orientation provided to the agency staff members.

During an interview with the manager from an agency, they stated that no home specific training was provided to their employees prior to them being assigned to The Village of Sandalwood.

The DNC acknowledged the home did not provide orientation and training to agency staff members prior to their first day in the home. [s. 76. (2)]



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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 the licensee of a long-term care home must ensure that no person mentioned in subsection (1) performs their responsibilities before receiving training in the areas mentioned below:

- 1. The Resident's Bill of Rights.
- 2. The long-term care home's mission statement.
- 3. The long-term care home's policy to promote zero tolerance of abuse and neglect of residents.
- 4. The duty under section 24 to make mandatory reports.
- 5. The protection afforded by section 26.
- 6. The long-term care home's policy to minimize the restraining of residents.
- 7. Fire prevention and safety.
- 8. Emergency and evacuation procedures.
- 9. Infection prevention and control.
- 10. All Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee that were relevant to the person's responsibilities.
- 11. Any other areas provided for in the regulations, to be implemented voluntarily.

Issued on this 27th day of December, 2018

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

Original report signed by the inspector.