



**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
Feb 11, 2019	2019_767643_0004	004443-18, 008259-18	Complaint

Licensee/Titulaire de permis

The Wexford Residence Inc.
1860 Lawrence Avenue East TORONTO ON M1R 5B1

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

The Wexford
1860 Lawrence Avenue East SCARBOROUGH ON M1R 5B1

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

ADAM DICKEY (643), JULIEANN HING (649)

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): On-site January 21-24, 2019; off-site telephone interview conducted on January 31, 2019.

The following complaint intakes were inspected concurrently during this inspection:

Log #004443-18 - related to safe and secure home, falls prevention and continence care; and

Log #008259-18 - related to withholding approval for admission.

During the course of the inspection, the inspector(s) spoke with the Director of Care (DOC), Nurse Manager (NM), social services coordinator (SSC), director of programs and services, environmental services manager, Local Health Integration Network Care Coordinator, Resident Care and Services administrative assistant, Registered Practical Nurses (RPN), Personal Support Workers (PSW) and residents.

The following Inspection Protocols were used during this inspection:

Admission and Discharge

Continence Care and Bowel Management

Safe and Secure Home

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)



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

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.

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 the applicant's admission to the home unless:

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

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

(c) circumstances existed which were 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), alleging that the home was unable to accommodate applicant #018's needs related to a medical condition that required isolation precaution. According to the complainant, applicant #018's application had been accepted by the home.



Record review indicated that a written notice was sent by the home to the applicant on an identified date, citing the reason for refusal was tier two - lack of physical facility and the notice further stated that the home did not have the type of accommodation they required. Further review indicated that applicant #018 had applied for basic accommodation 18 months prior to the date of the written notice, having disclosed in their application diagnosis of a medical condition and requirement of an isolation room, and was accepted by the home.

In an interview, social services coordinator (SSC) #134 indicated that applicant #018 had applied for basic accommodation. According to the SSC applicant #018's Resident Assessment Instrument-Minimum Data Set (RAI-MDS) assessment at the time of application showed that they were diagnosed with a medical condition and required a private room. On an identified date, the home accepted the applicant to their waiting list for basic accommodation, even though their assessment records indicated they required an isolation room with contact precautions. According to the SSC, the Central East Local Health Integration Network (CELHIN) told the home that if they were not willing to accept the applicant a written notice was required. A written notice was sent to the applicant. The SSC indicated that the home had not refused the applicant due to their medical condition, rather due to a financial issue as the applicant required private accommodation, but was only able to afford basic accommodation. The SSC questioned who was going to cover the difference in cost between basic and private accommodation. When the SSC was asked if other alternatives such as high intensity needs funding (HINF) was explored by the home they initially responded no and then explained that they had but were unsure if the applicant would be covered. The SSC confirmed that the home did have residents in a private room due to responsive behaviours and the difference between basic and private accommodation cost was covered through HINF.

In an interview the DOC, indicated that according to the Provincial Infectious Diseases Advisory Committee (PIDAC) documentation, a client with this type of medical condition required a single room with their own toileting facility. When the DOC was asked why the home was unable to accommodate the applicant the DOC explained that it was clearly stated in the written notice, that a single room was essential and the applicant was applying for a basic accommodation and the home was unable to accommodate due to lack of physical facility. The inspector inquired if the home had considered alternative options such as high intensity funding, the inspector was told by the DOC not to their knowledge. The inspector further asked if this could have been an option for the applicant and the DOC responded yes, absolutely.



The above interviews demonstrated that the home did not lack the physical facility as they had indicated in the written notice to the applicant as the home does offer private accommodations and could seek out alternatives to assist with funding the accommodation. [s. 44. (7) (a)]

2. The licensee has failed to ensure that when approval for admission is withheld, the written notice has provided a detailed explanation of the supporting facts, as they related to the home and the applicant's condition and requirement for care, an explanation of how the supporting facts justified the decision to withhold approval and the contact information for the Director.

Record review indicated that a written notice was sent to the applicant on an identified date, citing the reason for refusal was tier two - lack of physical facility and the notice further stated that the home did not have the type of accommodation they required. No detailed explanation with supporting facts as it related to both the home and the applicant's condition and requirements for care was provided in the written notice.

In an interview with SSC #134, they acknowledged that the written notice from the home to applicant #018 did not provide a detailed explanation for the home's refusal based on how the supporting facts justified the decision.

In an interview the DOC indicated that the home had changed their format for written notices to applicants to include more detail as per the regulation. When asked if the written notice to applicant #018, had provided a detail explanation to the applicant, the DOC replied that it was subjective and could not comment. [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 with:

1. Ensuring that 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 application'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; and

2. Ensuring that if the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care, to be implemented voluntarily.

Issued on this 12th day of February, 2019

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

Original report signed by the inspector.