



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

**Inspection Report under
the Long-Term Care
Homes Act, 2007**

**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

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

**Rapport d'inspection sous la
Loi de 2007 sur les foyers de
soins de longue durée**

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

Public Copy/Copie du public

Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
May 1, 2017	2017_539120_0023	004818-17	Follow up

Licensee/Titulaire de permis

THE THOMAS HEALTH CARE CORPORATION
490 Highway #8 STONEY CREEK ON L8G 1G6

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

ARBOUR CREEK LONG-TERM CARE CENTRE
2717 KING STREET EAST HAMILTON ON L8G 1J3

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

BERNADETTE SUSNIK (120)

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): March 30, 31 and April 4, 2017

An inspection (2016-570528-0025) was previously conducted December 2 to 13, 2016, and an order was issued related to unsafe transferring technique while using a mechanical floor lift. Three specific conditions were required in the order. One condition remains outstanding which is identified below.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, registered nurses and personal support workers.

During the course of the inspection, the inspector reviewed the identified resident's plan of care, confirmed the type of education received by staff and how staff are monitored for appropriate mechanical lift equipment use, observed the availability of slings and lifts and the use of sit to stand lifts and slings by staff and confirmed that no injuries or falls occurred from use of a mechanical lift over the past 6 months.

Ad-hoc notes were used during this inspection.

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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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

Legendé

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.



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WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 36. Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents. O. Reg. 79/10, s. 36.

Findings/Faits saillants :

1. The licensee did not ensure that staff #120 used safe transferring and positioning techniques when assisting resident #040 on November 14, 2016.

An inspection was previously conducted on December 2 to 13, 2016, and an order was issued with three specific requirements, one of which related to educating "all direct care staff" in the use of a particular type of mechanical floor lift and the application of attached safety device(s). The compliance due date was February 28, 2017. The order followed an incident which occurred in November 2016, when resident #040 was transferred with a particular floor mechanical lift by one staff member and sustained superficial injuries. Confirmation was obtained from Registered staff #121, that the PSW did not transfer the resident with two person assistance and did not apply a safety device required by the manufacturer. The interim Director of Care (DOC) stated that all residents that were transferred with the mechanical floor lift were to be transferred with two staff assistance and that the attached safety device was to be applied. The interim DOC confirmed that PSW #120 did not use safe transferring techniques when they transferred resident #040 by themselves and did not apply the safety device in November 2016.

The DOC confirmed during this inspection that only 41 out of 93 direct care staff received education. The method of education included the requirement for all direct care staff to read their "safe lift and transfer" policy and sign a statement that they read and understood the policy. The policy included the requirement to ensure that mechanical floor lifts be used with the attached safety devices and that two persons were always required to complete the transfer. The licensee did not ensure that all direct care staff received education regarding the use of the safety devices when a particular mechanical floor lift was used. [s. 36.]

Additional Required Actions:

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



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Issued on this 9th day of May, 2017

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

Original report signed by the inspector.



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

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

**Ministère de la Santé et
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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) : BERNADETTE SUSNIK (120)

Inspection No. /

No de l'inspection : 2017_539120_0023

Log No. /

Registre no: 004818-17

Type of Inspection /

Genre

d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : May 1, 2017

Licensee /

Titulaire de permis :

LTC Home /

Foyer de SLD :

THE THOMAS HEALTH CARE CORPORATION
490 Highway #8, STONEY CREEK, ON, L8G-1G6

ARBOUR CREEK LONG-TERM CARE CENTRE
2717 KING STREET EAST, HAMILTON, ON, L8G-1J3

Name of Administrator /

**Nom de l'administratrice
ou de l'administrateur :**

Lisa Paladino

To THE THOMAS HEALTH CARE CORPORATION, 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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Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term Care
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Ordre(s) de l'inspecteur

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Order # /

Ordre no : 001

Order Type /

Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Linked to Existing Order /

Lien vers ordre existant: 2016_570528_0025, CO #001;

Pursuant to / Aux termes de :

O.Reg 79/10, s. 36. Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents. O. Reg. 79/10, s. 36.

Order / Ordre :

The licensee shall provide training to all direct care staff on the proper use of the mechanical floor lift in accordance with the lift equipment manufacturer's guidelines.

Grounds / Motifs :

1. The licensee did not ensure that staff #120 used safe transferring and positioning techniques when assisting resident #040 on November 14, 2016.

An inspection was previously conducted on December 2 to 13, 2016, and an order was issued with three specific requirements, one of which related to educating "all direct care staff" in the use of a particular type of mechanical floor lift and the application of attached safety device(s). The compliance due date was February 28, 2017. The order followed an incident which occurred in November 2016, when resident #040 was transferred with a particular floor mechanical lift by one staff member and sustained superficial injuries.

Confirmation was obtained from Registered staff #121, that the PSW did not transfer the resident with two person assistance and did not apply a safety device required by the manufacturer. The interim Director of Care (DOC) stated that all residents that were transferred with the mechanical floor lift were to be transferred with two staff assistance and that the attached safety device was to be applied. The interim DOC confirmed that PSW #120 did not use safe transferring techniques when they transferred resident #040 by themselves and did not apply the safety device in November 2016.

The DOC confirmed during this inspection that only 41 out of 93 direct care staff



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received education. The method of education included the requirement for all direct care staff to read their "safe lift and transfer" policy and sign a statement that they read and understood the policy. The policy included the requirement to ensure that mechanical floor lifts be used with the attached safety devices and that two persons were always required to complete the transfer. The licensee did not ensure that all direct care staff received education regarding the use of the safety devices when a particular mechanical floor lift was used.

This order is based upon three factors where there has been a finding of noncompliance in keeping with s.299(1) of Ontario Regulation 79/10. The factors include scope, severity and history of non-compliance. In relation to s. 36 of Ontario Regulation 79/10, the scope of the non-compliance is pattern, as more than one direct care staff member did not receive education in the safe use of the sit-to-stand lift, the severity of the non-compliance has the potential to cause harm to residents related to the use of lift equipment and the history of non-compliance is on-going as an order was previously issued on January 11, 2017.

(120)

This order must be complied with /

Vous devez vous conformer à cet ordre d'ici le : May 31, 2017



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

Ordre(s) de l'inspecteur

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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 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



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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing 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:

Health Services Appeal and Review Board and the Director

Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

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 SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

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

La demande de réexamen doit contenir ce qui suit :

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

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur
a/s Coordinateur des appels
Inspection de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



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En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Inspection de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsb.on.ca.

Issued on this 1st day of May, 2017

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

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

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