Ontario

Ministry of Health and Long-Term Care

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

Ministére de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch
Division de la responsabilisation et de la performance du système de santé
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jan 30, Feb 1, 16, 2012	2012_060127_0005	Critical Incident

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

RICHARD HAYDEN (127)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Critical Incident inspection.

During the course of the inspection, the inspector(s) spoke with the administrator, associate directors of resident client care, registered staff and non-registered staff.

The inspector conducted an inspection related to H-002541-11.

During the course of the inspection, the inspector(s) reviewed management's documentation of its investigation into the incident, an employee's personnel file, and a resident's chart and electronic file.

The following Inspection Protocols were used during this inspection:

Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

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Legend	Legendé
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.) The following constitutes written notification of non-compliance under paragraph 1 of section 152 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. 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. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents. 2007, c. 8, s. 5.

Findings/Faits saillants :

1. On January 30, 2012, the inspector attended the home and was able to gain access to the building at the north side through the receiving area garage door that was left wide open. The door leading from the garage/receiving area was not locked and led to a vestibule where another unlocked door permitted access into the building. The inspector separately encountered two employees and did not identify himself to them. Neither employee questioned who the inspector was nor the purpose for being in the home. One of the employees provided the inspector with the security code for the elevator to gain access to all floors.
2. The garage door was identified as being left open in the inspection report issued October 4, 2011.

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 maintaining a safe and secure environment, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 19. Duty to protect

Specifically failed to comply with the following subsections:

s. 19. (1) Every licensee of a long-term care home shall protect residents from abuse by anyone and shall ensure that residents are not neglected by the licensee or staff. 2007, c. 8, s. 19 (1).

Findings/Faits saillants :

1. On January 30, 2012, the inspector confirmed the following information:
An identified resident was neglected by his/her primary caregiver by not providing him/her with the care, services or assistance required for health, safety and well-being. A personal care aide (PCA) was assigned to the resident for a particular shift. Shortly after the shift ended and the PCA had left the floor, another PCA began his/her rounds and entered the resident's room. This PCA discovered the resident and his/her room in an unsanitary condition. The PCA reported this to registered staff and together they provided care to the resident and cleaned his/her room. The PCA on the previous shift was supposed to do a final round of resident checks and provide care as necessary prior to the end of his/her shift. The PCA was witnessed to have been sitting at the desk for the latter part of his/her shift.

The identified PCA was trained on Arbour Creek Long Term Care Centre's Abuse Policy in 2010. He/She signed and dated a form indicating he/she read, understood and agreed to comply with this policy.

Issued on this 21st day of March, 2012

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