

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

Long-Term Care Homes Division Long-Term Care Inspections Branch

Division des foyers de soins de longue durée Inspection de soins de longue durée London Service Area Office 130 Dufferin Avenue 4th floor LONDON ON N6A 5R2 Telephone: (519) 873-1200 Facsimile: (519) 873-1300 Bureau régional de services de London 130 avenue Dufferin 4ème étage LONDON ON N6A 5R2 Téléphone: (519) 873-1200 Télécopieur: (519) 873-1300

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	Inspection No /	Log # /	Type of Inspection /
	No de l'inspection	Registre no	Genre d'inspection
May 31, 2016	2016_416515_0004	029852-15	Complaint

Licensee/Titulaire de permis

Chartwell Master Care LP 100 Milverton Drive Suite 700 MISSISSAUGA ON L5R 4H1

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

THE ROYAL OAK LONG TERM CARE CENTRE 1750 Division Road North KINGSVILLE ON N9Y 4G7

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

RAE MARTIN (515)

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): April 5, 6, 7, 8, 11, 12, 21, 22, 26 and May 5, 2016.

This off-site complaint inspection was related to authorization for admission to a home.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, Liaison for CCAC and Erie St. Clair Community Care Access Centre Patient Services Manager.

The inspector also reviewed the long-term care home admission application, related correspondence and documentation from inquiries completed by Inspector #171.

Ad-hoc notes were used during this inspection.

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

2 WN(s) 2 VPC(s) 0 CO(s) 0 DR(s) 0 WAO(s)



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NON-COMPLIANCE / NON - RESPECT DES EXIGENCES			
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).	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



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Specifically failed to comply with the following:

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 :





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1. The licensee has failed to ensure that when withholding approval for admission to the home there was a detailed explanation of the supporting facts, as they related to both the home and the applicant's condition and requirements for care and an explanation of how the supporting facts justified the decision to withhold approval.

Applicant #001 was residing in the community. A review of the application for long- term care completed by the CCAC indicated the family believed the applicant was not in the right level of care and they were concerned for his/her safety.

A Community Care Access Center (CCAC) Care Coordinator assessed the applicant and determined the applicant was eligible for long-term care placement.

A review of the CCAC health records system indicated that the licensee requested more information eight weeks after receiving the application, withheld approval the following week and a letter was sent to the applicant.

The explanation of the supporting facts, as they relate both to the home and the applicant's condition and requirements for care, were not detailed as required.

The supporting facts, as they relate both to the home and the applicant's condition and requirements for care, were not consistent with the information provided by the CCAC. The information was not detailed in a way to explain the origin of the information, and as such could not be verified.

The letter did not give an explanation of how the supporting facts, as they relate to the applicant's condition and requirements for care, relate to the lack of nursing expertise chosen as the grounds for withholding approval.

The letter did not provide an explanation to justify the decision to withhold approval.



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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 when withholding approval for admission to the home, there is a detailed explanation of the supporting facts, as they related to both the home and the applicant's condition and requirements for care, and an explanation of how the supporting facts justified the decision to withhold approval, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 162. Approval by licensee

Specifically failed to comply with the following:

s. 162. (3) Subject to subsections (4) and (5), the licensee shall, within five business days after receiving the request mentioned in clause (1) (b), do one of the following:

1. Give the appropriate placement co-ordinator the written notice required under subsection 44 (8) of the Act. O. Reg. 79/10, s. 162 (3).

2. If the licensee is withholding approval for the applicant's admission, give the written notice required under subsection 44 (9) of the Act to the persons mentioned in subsection 44 (10) of the Act. O. Reg. 79/10, s. 162 (3).

Findings/Faits saillants :



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1. The licensee has failed to ensure that written notice was provided within five business days after receiving the request to determine whether to give or withhold approval for the applicant's admission to the home.

A review of the CCAC health records system indicated that an application for admission was received by the licensee for Applicant #001 on an identified date. The licensee requested more information eight weeks after receiving the application, withheld approval the following week, and sent a letter to the applicant.

In a telephone interview, the home's Liaison for CCAC, acknowledged that she had not provided written notice within five business days after receiving the request to determine whether to give or withhold approval for the applicant's admission to the home.

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 written notice is provided within five business days after receiving the request to determine whether to give or withhold approval for the applicant's admission to the home, to be implemented voluntarily.

Issued on this 31st day of May, 2016

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

Original report signed by the inspector.