



**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**

Ottawa Service Area Office
347 Preston St Suite 420
OTTAWA ON K1S 3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347 rue Preston bureau 420
OTTAWA ON K1S 3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

Amended Public Copy/Copie modifiée du public

Report Date(s)/ Date(s) du Rapport	Inspection No/ No de l'inspection	Log #/ No de registre	Type of Inspection / Genre d'inspection
Nov 26, 2018	2018_621547_0030 (A1)	026208-18, 028555-18	Complaint

Licensee/Titulaire de permis

Royal Ottawa Health Care Group
1141 Carling Avenue OTTAWA ON K1Z 7K4

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

Royal Ottawa Place
1145 Carling Avenue OTTAWA ON K1Z 7K4

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

Amended by LISA KLUKE (547) - (A1)

Amended Inspection Summary/Résumé de l'inspection modifié



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durée***

Compliance order regarding s. 213. Director of Nursing and Personal Care has been rescinded and replaced with a written notification for this report.

Issued on this 26th day of November, 2018 (A1)

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

Original report signed by the inspector.



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Amended by LISA KLUKE (547) - (A1)

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The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): September 19, 2018 on site and September 24, 25, 2018 off site.

The following complaints were conducted concurrently during this inspection.

Log # 028555-18 related to concerns regarding Alternative Level of Care (ALC) to Long-Term Care (LTC) funding project.

Log # 026208-18 related to concerns for qualifications and hours of work for Administrator and Director of Nursing and Personal Care in the home.

During the course of the inspection, the inspector(s) spoke with an Office Coordinator, a Receptionist, the Manager of Resident and Family Services and the Vice President of Patient Care Services.

The following Inspection Protocols were used during this inspection:

Sufficient Staffing

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

2 WN(s)

1 VPC(s)

1 CO(s)

0 DR(s)

0 WAO(s)



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Légende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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.)</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.)</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 213. Director of Nursing and Personal Care



Specifically failed to comply with the following:

s. 213. (1) Every licensee of a long-term care home shall ensure that the home's Director of Nursing and Personal Care works regularly in that position on site at the home for the following amount of time per week:

- 1. In a home with a licensed bed capacity of 19 beds or fewer, at least four hours per week. O. Reg. 79/10, s. 213 (1).**
- 2. In a home with a licensed bed capacity of more than 19 but fewer than 30 beds, at least eight hours per week. O. Reg. 79/10, s. 213 (1).**
- 3. In a home with a licensed bed capacity of more than 29 but fewer than 40 beds, at least 16 hours per week. O. Reg. 79/10, s. 213 (1).**
- 4. In a home with a licensed bed capacity of more than 39 but fewer than 65 beds, at least 24 hours per week. O. Reg. 79/10, s. 213 (1).**
- 5. In a home with a licensed bed capacity of 65 beds or more, at least 35 hours per week. O. Reg. 79/10, s. 213 (1).**

Findings/Faits saillants :



1. The licensee has failed to ensure that the Director Of Nursing and Personal Care (DONPC) known as the Director of Care (DOC) in the home, work regularly in that position on site for at least 35 hours per week in a home with a licensed bed capacity of 65 beds or more.

On September 19, 2018 inspector #547 was informed by the Office Coordinator that the previous Administrator/DOC had resigned from the home in August 2018 and replaced with an acting Administrator/DOC at this time. The Office Coordinator indicated the Manager of Resident and Family Services was the on site acting replacement with support provided by the Vice President of Patient Care Services located off site at a hospital.

On September 25, 2018 the Manager of Resident and Family Services indicated to inspector #547 that the Vice President of Patient Care Services was the acting Director of Care at this time working off site at a hospital. The Manager of Resident and Family Services indicated that the acting DOC has not worked on site in the home 35 hours per week. The Vice President of Patient Care Services is based off site at a hospital, and will meet regularly with the Manager of Resident and Family Services each week, usually three times a week to review any issues.

The Manager of Resident and Family Services indicated they were not aware that the acting DOC was required to be working on site in the home for this role.

As such, the DOC does not work regularly in that position on site for at least 35 hours weekly as required by this section. [s. 213. (1)]

Additional Required Actions:

(A1)

The following order(s) have been rescinded: CO# 001



WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 212.

Administrator

Specifically failed to comply with the following:

s. 212. (1) Every licensee of a long-term care home shall ensure that the home's Administrator works regularly in that position on site at the home for the following amount of time per week:

- 1. In a home with a licensed bed capacity of 64 beds or fewer, at least 16 hours per week. O. Reg. 79/10, s. 212 (1).**
- 2. In a home with a licensed bed capacity of more than 64 but fewer than 97 beds, at least 24 hours per week. O. Reg. 79/10, s. 212 (1).**
- 3. In a home with a licensed bed capacity of 97 beds or more, at least 35 hours per week. O. Reg. 79/10, s. 212 (1).**

Findings/Faits saillants :



1. The licensee has failed to ensure that the home's Administrator works regularly in that position on site in the home with a licensed bed capacity of more than 64 but fewer than 97 beds, for at least 24 hours per week

On September 19, 2018 inspector #547 conducted an inspection in the home, and informed by the Office Coordinator that the previous Administrator/Director of Care(DOC) had resigned from work in August 2018. The Office Coordinator indicated the acting Administrator/DOC was the home's Manager of Resident and Family Services with support from the hospitals Vice President of Patient Care Services located off site.

On September 25, 2018 the Manager of Resident and Family Services indicated to inspector #547 to be the Acting Administrator in the home at this time, however did not hold the qualifications for the Administrator role at this time. The Manager of Resident and Family Services indicated that the Vice President of Patient Care Services was qualified for Administrator however was not working on site in the home at this time. The Manager of Resident and Family Services indicated to be working the Administrator hours during the acting Administrator role since August, 2018 and has been enrolled into the Administrator course once they were made aware of this requirement.

As such, the Administrator qualified for this role was not working regularly in that position on site 24 hours per week as required by this section. [s. 212. (1)]

Additional Required Actions:



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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 the home's Administrator works regularly in that position on site in the home with a licensed bed capacity of more than 64 but fewer than 97 beds, for at least 24 hours per week, to be implemented voluntarily.

Issued on this 26th day of November, 2018 (A1)

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

Original report signed by the inspector.



Ministry of Health and
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Ministère de la Santé et des
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Order(s) of the Inspector

Ordre(s) de l'inspecteur

Pursuant to section 153 and/or
section 154 of the *Long-Term
Care Homes Act, 2007*, S.O.
2007, c. 8

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

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**Name of Inspector (ID #) /
Nom de l'inspecteur (No) :** Amended by LISA KLUKE (547) - (A1)

**Inspection No. /
No de l'inspection :** 2018_621547_0030 (A1)

**Appeal/Dir# /
Appel/Dir#:**

**Log No. /
No de registre :** 026208-18, 028555-18 (A1)

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

**Report Date(s) /
Date(s) du Rapport :** Nov 26, 2018(A1)

**Licensee /
Titulaire de permis :** Royal Ottawa Health Care Group
1141 Carling Avenue, OTTAWA, ON, K1Z-7K4

**LTC Home /
Foyer de SLD :** Royal Ottawa Place
1145 Carling Avenue, OTTAWA, ON, K1Z-7K4

**Name of Administrator /
Nom de l'administratrice
ou de l'administrateur :** Nicoleta Burcea

To Royal Ottawa Health Care Group, 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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L. O. 2007, chap. 8

(A1)

The following Order(s) have been rescinded:

Order # / 001 **Order Type /** Compliance Orders, s. 153. (1) (a)
Ordre no : **Genre d'ordre :**

**Linked to Existing Order/
Lien vers ordre existant :**

Pursuant to / Aux termes de :

O.Reg 79/10, s. 213. (1) Every licensee of a long-term care home shall ensure that the home's Director of Nursing and Personal Care works regularly in that position on site at the home for the following amount of time per week:

1. In a home with a licensed bed capacity of 19 beds or fewer, at least four hours per week.

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3. In a home with a licensed bed capacity of more than 29 but fewer than 40 beds, at least 16 hours per week.

4. In a home with a licensed bed capacity of more than 39 but fewer than 65 beds, at least 24 hours per week.

5. In a home with a licensed bed capacity of 65 beds or more, at least 35 hours per week. O. Reg. 79/10, s. 213 (1).



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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, commercial courier 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

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing, when service is made by a commercial courier it is deemed to be made on the second business day after the day the courier receives the document, 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:



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L. O. 2007, chap. 8

Health Services Appeal and Review Board and the Director

Attention Registrar
Health Services Appeal and Review Board
151 Bloor Street West, 9th Floor
Toronto, ON M5S 1S4

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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L. O. 2007, chap. 8

**RENSEIGNEMENTS RELATIFS AUX RÉEXAMENS DE DÉCISION ET AUX
APPELS**

PRENEZ AVIS :

Le/la titulaire de permis a le droit de faire une demande de réexamen par le directeur de cet ordre ou de ces ordres, et de demander que le directeur suspende cet ordre ou ces ordres conformément à l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée.

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

La demande écrite doit comporter ce qui suit :

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

La demande de réexamen présentée par écrit doit être signifiée en personne, par courrier recommandé, par messagerie commerciale ou par télécopieur, au :

Directeur
a/s du coordonnateur/de la coordonnatrice en matière d'appels
Direction de l'inspection des foyers de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Toronto ON M5S 2B1
Télécopieur : 416-327-7603



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L. O. 2007, chap. 8

Quand la signification est faite par courrier recommandé, elle est réputée être faite le cinquième jour qui suit le jour de l'envoi, quand la signification est faite par messagerie commerciale, elle est réputée être faite le deuxième jour ouvrable après le jour où la messagerie reçoit le document, et lorsque la signification est faite par télécopieur, elle est réputée être faite le premier jour ouvrable qui suit le jour de l'envoi de la télécopie. Si un avis écrit de la décision du directeur n'est pas signifié au/à la titulaire de permis dans les 28 jours de la réception de la demande de réexamen présentée par le/la titulaire de permis, cet ordre ou ces ordres sont réputés être confirmés par le directeur, et le/la titulaire de permis est réputé(e) avoir reçu une copie de la décision en question à l'expiration de ce délai.

Le/la titulaire de permis a le droit d'interjeter appel devant la Commission d'appel et de révision des services de santé (CARSS) de la décision du directeur relative à une demande de réexamen d'un ordre ou des ordres d'un inspecteur ou d'une inspectrice conformément à l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée. La CARSS est un tribunal autonome qui n'a pas de lien avec le ministère. Elle est créée par la loi pour examiner les questions relatives aux services de santé. Si le/la titulaire décide de faire une demande d'audience, il ou elle doit, dans les 28 jours de la signification de l'avis de la décision du directeur, donner par écrit un avis d'appel à la fois à :

la Commission d'appel et de révision des services de santé et au directeur

À l'attention du/de la registrateur(e)
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto ON M5S 1S4

Directeur
a/s du coordonnateur/de la coordonnatrice en matière
d'appels
Direction de l'inspection des foyers de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Toronto ON M5S 2B1
Télécopieur : 416-327-7603

À la réception de votre avis d'appel, la CARSS en accusera réception et fournira des instructions relatives au processus d'appel. Le/la titulaire de permis peut en savoir davantage sur la CARSS sur le site Web www.hsarb.on.ca.

Issued on this 26th day of November, 2018 (A1)

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

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

Amended by LISA KLUKE (547) - (A1)



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

Ottawa Service Area Office