



**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 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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**Public Copy/Copie du public**

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<b>Report Date(s) / Date(s) du rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Aug 8, 2017	2017_569508_0010	020961-16, 033268-16	Complaint

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**Licensee/Titulaire de permis**

BENEVOLENT SOCIETY "HEIDEHOF" FOR THE CARE OF THE AGED  
600 Lake Street St. Catharines ON L2N 4J4

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

HEIDEHOF LONG TERM CARE HOME  
600 Lake Street St. Catharines ON L2N 4J4

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

ROSEANNE WESTERN (508)

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**Inspection Summary/Résumé de l'inspection**

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

**This inspection was conducted on the following date(s): August 2, 2017.**

**PLEASE NOTE: This non-compliance was identified during an off-site inspection.**

**During the course of the inspection, the inspector(s) spoke with Community Care Access Centre (CCAC) placement Co-Ordinator and the Associate Director of Care (ADOC).**

**The following Inspection Protocols were used during this inspection:  
Admission and Discharge**



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

- 1 WN(s)
- 0 VPC(s)
- 0 CO(s)
- 0 DR(s)
- 0 WAO(s)

<b>NON-COMPLIANCE / NON - RESPECT DES EXIGENCES</b>	
<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>Legendé</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>



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**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).**

**Findings/Faits saillants :**

1. The licensee failed to ensure that they complied with the Act when they refused an applicant's admission to the home based on reasons that were not permitted within the legislation.

A) On an identified date in 2016, a letter that had been issued by the home indicating that applicant #001 had been refused admission to the home based on reasons that were not permitted within the legislation.

The applicant required extensive assistance from staff and had a specific medical device. The letter indicated that the home did not have the necessary resources to meet the applicant's care needs on a particular unit and also lacked the adequate staff-client ratio on that particular unit during evening and night shifts.

An off-site inspection was conducted on August 2, 2017, with the Associate Director of Care (ADOC) who confirmed the applicant was denied admission to the home for these reasons as stated in the letter.

It was confirmed during the off-site inspection that the licensee failed to ensure that they complied with the Act when they refused applicant #001's admission to the home based on reasons that were not permitted within the legislation. [s. 44. (7)]

2. B) On an identified date in 2016, a letter that had been issued by the home indicating that applicant #002 had been refused admission to the home based on reasons that were not permitted within the legislation.

This information was reviewed and confirmed during an interview on August 2, 2017, with the Community Care Access Centre (CCAC) placement Co-Ordinator and the ADOC.

It was confirmed during the off-site inspection that the licensee failed to ensure that they complied with the Act when they refused applicant #002's admission to the home based on reasons that were not permitted within the legislation. [s. 44. (7)]

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**Issued on this 8th day of August, 2017**

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

**Original report signed by the inspector.**