



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 le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch
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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Jul 25, 26, Aug 10, 15, 2011; 2011_090172_0008; Complaint

Licensee/Titulaire de permis

THE WOMEN'S CHRISTIAN ASSOCIATION OF LONDON
2022 Kains Road, LONDON, ON, N6A-0A8

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

McCORMICK HOME
2022 Kains Road, LONDON, ON, N6K-0A8

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

JOAN WOODLEY (172)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the Inspector(s) spoke with the Administrator, the Director of Care, the Assistant Director of Care, 1 Registered Nurse, 1 Registered Practical Nurse, 5 Personal Support Workers, 1 Dietary Aide, 1 Housekeeping Aide, 1 Physiotherapist, 1 Physiotherapy Aide, and 2 family members.

During the course of the inspection, the inspector(s) held interviews, reviewed records, policies, and observed care.

The following Inspection Protocols were used in part or in whole during this inspection:

- Admission Process
Critical Incident Response
Dignity, Choice and Privacy
Prevention of Abuse, Neglect and Retaliation
Training and Orientation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Definitions WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	Définitions 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. 6. Plan of care
Specifically failed to comply with the following subsections:**

- s. 6. (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,**
- (a) the planned care for the resident;**
 - (b) the goals the care is intended to achieve; and**
 - (c) clear directions to staff and others who provide direct care to the resident. 2007, c. 8, s. 6 (1).**
- s. 6. (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan. 2007, c. 8, s. 6 (7).**

Findings/Faits sayants :

1. Record review revealed an intervention implemented was not indicated on the care plan. [LTCHA, S.O. 2007, c.8, s.6.(7)]
2. Resident observations revealed the resident was not provided with the care as indicated on the care plan. [LTCHA, S.O. 2007, c.8, s.6.(7)]
3. Record review of care plan revealed a discrepancy in incontinence product to be used. [LTCHA, S.O. 2007, c.8, s.6.(1)(c)]
4. Signs in the resident's room contradicted the care plan. [LTCHA, S.O. 2007, c.8, s.6.(1)(c)]

WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 78. Information for residents, etc.

Specifically failed to comply with the following subsections:

s. 78. (2) The package of information shall include, at a minimum,

- (a) the Residents' Bill of Rights;
- (b) the long-term care home's mission statement;
- (c) the long-term care home's policy to promote zero tolerance of abuse and neglect of residents;
- (d) an explanation of the duty under section 24 to make mandatory reports;
- (e) the long-term care home's procedure for initiating complaints to the licensee;
- (f) the written procedure, provided by the Director, for making complaints to the Director, together with the name and telephone number of the Director, or the name and telephone number of a person designated by the Director to receive complaints;
- (g) notification of the long-term care home's policy to minimize the restraining of residents and how a copy of the policy can be obtained;
- (h) the name and telephone number of the licensee;
- (i) a statement of the maximum amount that a resident can be charged under paragraph 1 or 2 of subsection 91 (1) for each type of accommodation offered in the long-term care home;
- (j) a statement of the reductions, available under the regulations, in the amount that qualified residents can be charged for each type of accommodation offered in the long-term care home;
- (k) information about what is paid for by funding under this Act or the Local Health System Integration Act, 2006 or the payments that residents make for accommodation and for which residents do not have to pay additional charges;
- (l) a list of what is available in the long-term care home for an extra charge, and the amount of the extra charge;
- (m) a statement that residents are not required to purchase care, services, programs or goods from the licensee and may purchase such things from other providers, subject to any restrictions by the licensee, under the regulations, with respect to the supply of drugs;
- (n) a disclosure of any non-arm's length relationships that exist between the licensee and other providers who may offer care, services, programs or goods to residents;
- (o) information about the Residents' Council, including any information that may be provided by the Residents' Council for inclusion in the package;
- (p) information about the Family Council, if any, including any information that may be provided by the Family Council for inclusion in the package, or, if there is no Family Council, any information provided for in the regulations;
- (q) an explanation of the protections afforded by section 26; and
- (r) any other information provided for in the regulations. 2007, c. 8, s. 78 (2)

Findings/Faits sayants :

1. Review of Admission Package revealed pages 2, 4, 6, and 8 of the Abuse and Threatening Behaviour Policy No. 1-500-20 last revised January 2011, were missing from the packages. These pages covered information on the Licensee must investigate, respond and act LTCHA, section 23; Mandatory reporting; Definitions of abuse: Sexual, Emotional, Verbal, Financial, Neglect and Program for Preventing Abuse; Whistle-Blowing protection and the Procedure for Investigation of Abuse.[LTCHA, S.O. 2007, c.8, s.78.(2)(c)(d)]

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 be implemented voluntarily.

WN #3: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 23. Licensee must investigate, respond and act



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Specifically failed to comply with the following subsections:

- s. 23. (1) Every licensee of a long-term care home shall ensure that,
- (a) every alleged, suspected or witnessed incident of the following that the licensee knows of, or that is reported to the licensee, is immediately investigated:
 - (i) abuse of a resident by anyone,
 - (ii) neglect of a resident by the licensee or staff, or
 - (iii) anything else provided for in the regulations;
 - (b) appropriate action is taken in response to every such incident; and
 - (c) any requirements that are provided for in the regulations for investigating and responding as required under clauses (a) and (b) are complied with. 2007, c. 8, s. 23 (1).

Findings/Faits sayants :

1. Staff interview with Director of Care confirmed a verbal complaint alleging abuse was received by the home. No report to the Ministry of Health and Long Term Care (MOHLTC), in the form of a Mandatory report was made. [LTCHA, S.O. 2007, c.8, s. 23(1)(a)]
2. Staff Interview with Assistant Director of Care confirmed another allegation of abuse was received by the home. No in house investigation was completed by the home and no Mandatory report was filed with the MOHLTC.
Staff interview with Administrator confirmed that no Manadatory report was filed with the MOHLTC. [LTCHA, S.O. 2007, c.8, s. 23(1)(b)]

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 be implemented voluntarily.

Issued on this 1st day of September, 2011

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

Jean L. Modley