

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

**Rapport d'inspection en vertu de
la Loi de 2007 sur les foyers de
soins de longue durée**

**Long-Term Care Operations Division
Long-Term Care Inspections Branch**

**Division des opérations relatives aux
soins de longue durée
Inspection de soins de longue durée**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Oct 21, 2021	2021_533115_0004	012793-21	Complaint

Licensee/Titulaire de permis

Corporation of the City of Windsor
1881 Cabana Road West Windsor ON N9G 1C7

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

Huron Lodge Long Term Care Home
1881 Cabana Road West Windsor ON N9G 1C7

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

TERRI DALY (115)

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): September 28, 29, October 1 & 4, 2021.

This complaint inspection was completed in relation to reporting complaints.

An Infection Prevention and Control (IPAC) inspection was also completed concurrently with this inspection, see inspection report #2021_533115_0003.

During the course of the inspection, the inspector(s) spoke with the Administrator and a resident.

The inspector also reviewed health records, the homes verbal/written complaint policy and procedure, and the homes complaint log.

**The following Inspection Protocols were used during this inspection:
Reporting and Complaints**

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

1 WN(s)

1 VPC(s)

0 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 LTCHA, 2007 S.O. 2007, c.8, s. 22. Licensee to forward complaints

Specifically failed to comply with the following:

s. 22. (1) Every licensee of a long-term care home who receives a written complaint concerning the care of a resident or the operation of the long-term care home shall immediately forward it to the Director. 2007, c. 8, s. 22 (1).

Findings/Faits saillants :

1. The licensee has failed to ensure that the written complaint from a resident concerning their care was immediately forwarded to the Director.

On a specific date, a staff member brought forward concerns to the home related to an incident that occurred between another staff member and a resident. The staff member reported that the resident told them that an incident had occurred between them and a Personal Support Worker (PSW).

The communication/concern form completed by the Administrator documented that the concern was investigated, the resident was monitored for physical and social well being, that there was follow up with staff and that the concern was resolved.

A written letter from the resident was also found in the complaint log dated several months after the first incident. The complainant reiterated the concern, and asked if their concern had been reported to the ministry.

There was no further documentation found in relation to this written complaint.

A review of the home's current policy - Complaints, Verbal or Written indicates under Procedure:

4. All written complaints will be reported following the provincial reporting requirement and an investigation will begin immediately. Once a written complaint is received it will be forwarded to the Director as per the Long Term Care Homes Act.

An interview with the Administrator, they stated that they believed the issue had been resolved after the initial investigation, and that when they received the written complaint from the resident that it was filed in the complaint log with the complaint documents. The Administrator acknowledged that this written complaint should have been forwarded to the Director.

Sources: the home's investigation notes including the complaint log and communication/concern form; the written complaint from a resident, the home's policy and procedures and an interview with Administrator #100. [s. 22. (1)]

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 all written complaints concerning the care of a resident or the operation of the long-term care home shall immediately be forwarded to the Director, to be implemented voluntarily.

Issued on this 1st day of November, 2021

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

Original report signed by the inspector.