



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 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

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## Public Copy/Copie 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
Mar 1, 2019	2019_593573_0004	028924-18	Complaint

### Licensee/Titulaire de permis

Almonte General Hospital  
75 Spring Street ALMONTE ON K0A 1A0

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

Fairview Manor  
75 Spring Street ALMONTE ON K0A 1A0

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

ANANDRAJ NATARAJAN (573)

## 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): January 22, 2019.

This inspection was conducted for Complaint log #028924-18 related to refusal to accept the applicant for admission.

During the course of the inspection, the inspector(s) spoke with the Complainant and the Director of Care (DOC)

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>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. 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).**

**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 :**

1. The licensee failed to take into account the assessments and information under subsection 43 (6), and approve an applicant's admission to the home unless:

a) the home lacked the physical facilities necessary to meet the applicant's care requirements;

b) the staff of the home lack the nursing expertise necessary to meet the applicants care requirements; or

c) circumstances exist which were provided for in the regulations as being a ground for withholding approval.



On a specified date in 2018, the licensee sent a letter of refusal to accept for admission to applicant #001, stating that Fairview Manor would not be a suitable environment for the applicant as staff were not adequately prepared to support the level of intervention to manage the applicant's psychological needs. Furthermore, the letter stated that the Fairview Manor lacks necessary securities and staffing needed to properly monitor and care for the applicant.

On January 22, 2019, Inspector #573 spoke with the DOC, who indicated that the licensee was provided with applicant #001's recent assessments and information by the Local Health Integration Networks (LHIN). The DOC confirmed the contents of the letter to the applicant. Furthermore, the DOC stated that the staff of the home lack the nursing expertise necessary to meet the applicants care requirements.

The DOC acknowledged that the licensee did have Psycho-geriatric services and Behaviour Support Ontario (BSO) staff to assist with residents with behaviours. The Inspector reviewed with the DOC that the licensee had access to High Intensity Needs (HIN) funding from the Ministry of Health and Long Term Care (MOHLTC) wherein funds could be made available for staffing needs related to the care of a resident.

On January 22, 2019, Inspector #573 reviewed the letter and the legislative requirements for refusal to accept an applicant for admission and the requirements for the contents of the refusal letter with the DOC. Upon review, the DOC unable to provide sufficient evidence to validate the legislative rationale for the refusal to approve applicant #001's admission to Fairview Manor. [s. 44. (7) (b)]

2. The licensee has failed to ensure that when withholding approval for admission, the licensee shall give the persons described in subsection (10) a written notice setting out, a) the grounds or grounds on which the Licensee is withholding approval; b) a detailed explanation of the supporting facts, as they relate to both the home and to the applicant's condition and requirements for care; c) an explanation of how the supporting facts justify the decision to withhold approval; and d) contact information for the Director.

The written notice was provided to the applicant, as a letter by the licensee, on a specified date in 2018. In this letter, the licensee did not provide detailed explanation of the supporting facts associated with a reported lack of nursing expertise to meet applicant #001's care requirements required by this section to justify the decision to withhold approval. The licensee did not provide the contact information for the Director as required by this section. [s. 44. (9)]



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**Issued on this 4th day of March, 2019**

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

**Original report signed by the inspector.**