



**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 sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**Health System Accountability and  
Performance Division  
Performance Improvement and  
Compliance Branch**

**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
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## Public Copy/Copie du public

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<b>Report Date(s) / Date(s) du apport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Nov 27, 2015	2015_262523_0034	032637-15	Complaint

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### **Licensee/Titulaire de permis**

SHARON FARMS & ENTERPRISES LIMITED  
1340 HURON STREET LONDON ON N5V 3R3

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

Earls Court Village  
1390 Highbury Avenue North LONDON ON 000 000

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

ALI NASSER (523)

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## Inspection Summary/Résumé de l'inspection

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

**This inspection was conducted on the following date(s): November 25 & 26, 2015**

**This complaint was regarding responding to applications to the home.  
The following Complaint and Follow Up inspections were completed concurrently:  
Log # 027172-15/027892-15 / IL-40938-LO  
Log # 012780-15 (Follow up)**

**During the course of the inspection, the inspector(s) spoke with the President, the Administrator, Interim Director of Care (IDOC), Geriatric Clinical Nurse Specialist (GCNS), Environmental Services Manager (ESM), Activity Manager, Office Manager, three Personal Support Workers (PSW) and two Registered Staff members.**

**The inspector(s) also conducted a tour of all resident areas and common areas, observed residents and care provided to them, reviewed policies and procedures of the home, meeting minutes and observed general maintenance, cleanliness and condition of the home.**

**Ad-hoc notes were used during this inspection.**

**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**

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	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).	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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 O.Reg 79/10, s. 162. Approval by licensee**



**Specifically failed to comply with the following:**

**s. 162. (3) Subject to subsections (4) and (5), the licensee shall, within five business days after receiving the request mentioned in clause (1) (b), do one of the following:**

- 1. Give the appropriate placement co-ordinator the written notice required under subsection 44 (8) of the Act. O. Reg. 79/10, s. 162 (3).**
- 2. If the licensee is withholding approval for the applicant's admission, give the written notice required under subsection 44 (9) of the Act to the persons mentioned in subsection 44 (10) of the Act. O. Reg. 79/10, s. 162 (3).**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that a written notice was sent within five business days of receiving an application for authorization of admission to the appropriate placement co-ordinator.

An interview with the Administrator revealed that the home has not been responding or providing written notices within five business days to the placement co-ordinator in response to placement applications. The Administrator confirmed that as of November 25, 2015, there were 50 applications that has not been responded to yet.

The Administrator revealed that the positions of Director of Care and Assistant Director of Care were vacant and this is why the home has been falling behind in reviewing and responding to applications. The Administrator reported that the Geriatric Clinical Nurse Specialist and the interim Director of Care will be reviewing and responding to all placement applications.

The Administrator confirmed that the home's expectation was that the applications be reviewed and a written response sent to the placement co-ordinator within five business days [s. 162. (3)]



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***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 that a written notice will be sent within five business days of receiving an application for authorization of admission to the appropriate placement co-ordinator., to be implemented voluntarily.***

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**Issued on this 4th day of December, 2015**

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

**Original report signed by the inspector.**