



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

**Rapport d'inspection
prevue le Loi de 2007
les foyers de soins de
longue durée**

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

Toronto Service Area Office
56 St. Clair Avenue West, 8th Floor

Bureau régional de services de Toronto
55, avenue St. Clair ouest, 8^{iem} étage
Ottawa ON K1S 3J4

**Ministère de la Santé et des Soins de
longue durée**

Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
conformité

Telephone: 416-325-9297
1-866-311-8002
Facsimille: 416-327-4486

Téléphone: 416-325-9297
1-866-311-8002
Télécopieur: 416-327-4486

Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
August 18, 2010	2010_152_2630_17Aug152108	Complaint
Licensee/Titulaire		
Chartwell Master Care LP 100 Milverton Drive, Suite 700 Mississauga, ON L5R 4H1		
Long-Term Care Home/Foyer de soins de longue durée		
Aurora Resthaven 32 Mill Street Aurora ON L4G 2R9		
Name of Inspector(s)/Nom de l'inspecteur(s)		
Catherine Palmer (152)		

Inspection Summary/Sommaire d'inspection



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

During the course of the inspection, the inspector(s) spoke with: Administrator, Director of Care, RAI coordinator

During the course of the inspection, the inspector reviewed complaint records.

The following Inspection Protocols were used in part or in whole during this inspection:
Reporting and Complaints Inspection Protocol

Findings of Non-Compliance were found during this inspection. The following action was taken:

- [1] WN
- [1] VPC

NON-COMPLIANCE / (Non respectés)

Abbreviations/Definitions

- WN - Written Notification / Avis écrit
- VPC - Voluntary Plan of Correction / Plan de redressement volontaire
- DR - Director's Report / Rapport de directeur
- CO - Compliance Order / Ordre de conformité
- WAO - Work and Activity Order / Ordre de travail et d'activités

The following findings were made under section 79(10) of the LTHA / Les constatations suivantes ont été faites en vertu de l'article 79(10) de la LTHA.

Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTHA) / Les exigences de la Loi de 2007 sur les foyers de soins de longue durée (LTHA) n'ont pas été respectées.

The following findings were made under section 79(10) of the LTHA / Les constatations suivantes ont été faites en vertu de l'article 79(10) de la LTHA.

Non respectés les exigences de la Loi de 2007 sur les foyers de soins de longue durée (LTHA) / Les exigences de la Loi de 2007 sur les foyers de soins de longue durée (LTHA) n'ont pas été respectées.

WN #1: The Licensee has failed to comply with O Regulation 79/10 s 101(1)1, 101 (1)3f, 101 (2) (a), (b), (c), (d), (e) 101 (1) Every licensee shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows: (1) The complaint shall be investigated and resolved where possible, and a response that complies with paragraph 3 provided within 10 business days of the receipt of the complaint, and where the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately. (3) A response shall be made to the person who made the complaint, indicating, (1) what the licensee has done to resolve the complaint. 101 (2) The licensee shall ensure that a documented record is kept in the home that includes, (a) the nature of each verbal or written complaint; (b) the date the complaint was received; (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to



be taken and any follow-up action required; (d) the final resolution, if any; (e) every date on which any response was provided to the complainant and a description of the response;

Findings:

1. There is no record of a written response as per paragraph 3 regarding complaint items identified in 10 written complaint letters received by the home from a complainant between April 19-June 14, 2010.
2. There is no record in the home of any verbal and/or written response provided to the complainant for complaint letters dated May 6, 14, 17, 25, 2010 and June 7, 2010.
3. There is no documentation to support that a response has been made to the complainant regarding what licensee has done to resolve the identified complaint concerns. There is no documented record that notes final resolution of identified complaint concerns.
4. The home's complaint log does not include all complaints received by the home from the complainant including date received and the subsequent nature of the complaints dated May 6, 14, 17, 25, 2010 and June 7, 2010.
5. There is no record of type of action taken to resolve complaint concerns, the date action taken, and time frames for action to be taken as well as follow up action.

Inspector ID #: 152

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 [identify what the written plan must cover to achieve compliance], to be implemented voluntarily.

<p>Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné</p>	<p>Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.</p>
<p><i>Katherine Jackson</i></p>	<p><i>Cathy Parnell (152)</i></p>
<p>Title: <i>Administrator</i> Date: <i>Oct 12/10</i></p>	<p>Date of Report (If different from date(s) of inspection). <i>October 12, 2010.</i></p>