



**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 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**

Ottawa Service Area Office
347 Preston St Suite 420
OTTAWA ON K1S 3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347 rue Preston bureau 420
OTTAWA ON K1S 3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

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
Feb 21, 2018	2017_617148_0037	027077-17	Other

Licensee/Titulaire de permis

City of Ottawa
Community and Social Services, Long Term Care Branch 200 Island Lodge Road
OTTAWA ON K1N 5M2

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

Peter D. Clark Centre
9 Meridian Place OTTAWA ON K2G 6P8

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

AMANDA NIXON (148), RUZICA SUBOTIC-HOWELL (548)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct an Other inspection.

This inspection was conducted on the following date(s): December 6, 7, 8, 11, 13, 18, 19, 20 and 21, 2017

This inspection is a follow-up to a Director's Order issued by Karen Simpson, on July 19, 2017 as part of a Director Referral under Inspection # 2017_620126_0004, made in accordance with s. 152, paragraph 4 of the Long-Term Care Homes Act, 2007 (LTCHA).

It is noted that this inspection was done concurrently, at the Garry J. Armstrong



Home, with the following:

- **Follow Up Inspection # 2017_683126_0024**
- **Critical Incident Inspection # 2017_597655_0020**
- **Complaint Inspection # 2017_658178_0019**

It is noted that this inspection was done concurrently, at the Peter D. Clark Centre, with the following:

- **Critical Incident Inspection # 2017_617148_0036**
- **Complaint Inspection # 2017_708548_0027**

It is noted that this inspection was done concurrently, at Centre d'Accueil Champlain, with the following:

- **Follow Up Inspection # 2017_621547_0019**
- **Critical Incident Inspection # 2017_621547_0020**

During the course of the inspection, the inspector(s) spoke with the City of Ottawa Acting Director of Long Term Care, Administrator, Program Manager for Resident Care Services, Program Manager for Personal Care Services, registered and non-registered nursing staff, Manager of Recreation and Leisure, Long Term Care Trainer, Food Service Workers, Housekeeping staff as well as several residents.

During the course of the inspections, the inspector(s) reviewed several resident health care records including kardexes and the identification of culturally appropriate care needs; the home's Abuse Policy # 750.65(2017) in both French and English. They reviewed documents related to education including staff sign in sheets for: Prevention of Abuse and Neglect and Reporting Requirements; reviewed the course completion list of staff for Surge learning on the Abuse Policy; interviews with registered and non- registered nursing staff in regards to the home's Abuse Policy, education received and reporting requirements. The inspectors also reviewed education on supervision, evaluation tools used for supervision education and home's supervision audit processes; and conducted interviews with management and registered staff regarding supervision and audit processes. They reviewed the home's staff orientation program related to mandatory reporting and abuse as well as interviewed newly orientated staff in regards to received training. The inspection team reviewed Complaints Forms, Incident Reports investigation documents and the On-Call Manager binder for reporting requirements as well as interviewed staff involved in these processes.



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The inspectors observed the delivery of resident care and services, staff- resident and resident-resident interactions as well as interviewed residents regarding the care and services received.

It is noted that the Director's Order, related to LTCHA s. 19 (1) and LTCHA s. 6 (7) was found to be in compliance at the time of this inspection.

During the course of this inspection, Non-Compliances were not issued.

0 WN(s)

0 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend

WN - Written Notification
VPC - Voluntary Plan of Correction
DR - Director Referral
CO - Compliance Order
WAO - Work and Activity Order

Legendé

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.

Issued on this 21st day of February, 2018

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

Original report signed by the inspector.