



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 prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch
Division de la responsabilisation et de la performance du système de santé
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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Apr 30, May 2, 4, 7, 8, 9, 11, 14, 16, 25, 28, 29, 2012; 2012\_103164\_0012; Complaint

Licensee/Titulaire de permis

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 ou des inspecteurs

GLORIA STILL (164)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with the Administrator, Acting Director of Care, Assistant Directors of Care, Registered Staff, Social Worker, Personal Support Workers, Optometrist's Office, residents.

During the course of the inspection, the inspector(s) reviewed health records, personnel files, education attendance records, Abuse Policy LTCE-RCA-E-002

Note: Existing Compliance Order issued in accordance with O. Reg. 79/10, s. 110. (2) during inspection 2012\_103164\_0011 conducted April 26, 30, May 1, 14, 24, 25, 2012, related to restraining by a physical device was not inspected as the due date has not passed.

The following Inspection Protocols were used during this inspection:

Dignity, Choice and Privacy

Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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<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>Legendé</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. 3. Residents' Bill of Rights**

Specifically failed to comply with the following subsections:

- s. 3. (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:
1. Every resident has the right to be treated with courtesy and respect and in a way that fully recognizes the resident's individuality and respects the resident's dignity.
  2. Every resident has the right to be protected from abuse.
  3. Every resident has the right not to be neglected by the licensee or staff.
  4. Every resident has the right to be properly sheltered, fed, clothed, groomed and cared for in a manner consistent with his or her needs.
  5. Every resident has the right to live in a safe and clean environment.
  6. Every resident has the right to exercise the rights of a citizen.
  7. Every resident has the right to be told who is responsible for and who is providing the resident's direct care.
  8. Every resident has the right to be afforded privacy in treatment and in caring for his or her personal needs.
  9. Every resident has the right to have his or her participation in decision-making respected.
  10. Every resident has the right to keep and display personal possessions, pictures and furnishings in his or her room subject to safety requirements and the rights of other residents.
  11. Every resident has the right to,
    - i. participate fully in the development, implementation, review and revision of his or her plan of care,
    - ii. give or refuse consent to any treatment, care or services for which his or her consent is required by law and to be informed of the consequences of giving or refusing consent,
    - iii. participate fully in making any decision concerning any aspect of his or her care, including any decision concerning his or her admission, discharge or transfer to or from a long-term care home or a secure unit and to obtain an independent opinion with regard to any of those matters, and
    - iv. have his or her personal health information within the meaning of the Personal Health Information Protection Act, 2004 kept confidential in accordance with that Act, and to have access to his or her records of personal health information, including his or her plan of care, in accordance with that Act.
  12. Every resident has the right to receive care and assistance towards independence based on a restorative care philosophy to maximize independence to the greatest extent possible.
  13. Every resident has the right not to be restrained, except in the limited circumstances provided for under this Act and subject to the requirements provided for under this Act.
  14. Every resident has the right to communicate in confidence, receive visitors of his or her choice and consult in private with any person without interference.
  15. Every resident who is dying or who is very ill has the right to have family and friends present 24 hours per day.
  16. Every resident has the right to designate a person to receive information concerning any transfer or any hospitalization of the resident and to have that person receive that information immediately.
  17. Every resident has the right to raise concerns or recommend changes in policies and services on behalf of himself or herself or others to the following persons and organizations without interference and without fear of coercion, discrimination or reprisal, whether directed at the resident or anyone else,
    - i. the Residents' Council,
    - ii. the Family Council,
    - iii. the licensee, and, if the licensee is a corporation, the directors and officers of the corporation, and, in the case of a home approved under Part VIII, a member of the committee of management for the home under section 132 or of the board of management for the home under section 125 or 129,
    - iv. staff members,
    - v. government officials,
    - vi. any other person inside or outside the long-term care home.
  18. Every resident has the right to form friendships and relationships and to participate in the life of the long-term care home.
  19. Every resident has the right to have his or her lifestyle and choices respected.
  20. Every resident has the right to participate in the Residents' Council.
  21. Every resident has the right to meet privately with his or her spouse or another person in a room that assures privacy.

22. Every resident has the right to share a room with another resident according to their mutual wishes, if appropriate accommodation is available.

23. Every resident has the right to pursue social, cultural, religious, spiritual and other interests, to develop his or her potential and to be given reasonable assistance by the licensee to pursue these interests and to develop his or her potential.

24. Every resident has the right to be informed in writing of any law, rule or policy affecting services provided to the resident and of the procedures for initiating complaints.

25. Every resident has the right to manage his or her own financial affairs unless the resident lacks the legal capacity to do so.

26. Every resident has the right to be given access to protected outdoor areas in order to enjoy outdoor activity unless the physical setting makes this impossible.

27. Every resident has the right to have any friend, family member, or other person of importance to the resident attend any meeting with the licensee or the staff of the home. 2007, c. 8, s. 3 (1).

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**Findings/Faits saillants :**

1. The licensee has not fully respected and promoted the resident's right to be treated with courtesy and respect and in a way that fully recognizes their individuality and respects their dignity. Two identified residents reported that recently while using the elevator a staff member was verbally inappropriate towards a resident. The administrator confirmed that recently there was an incident whereby a personal support worker was verbally inappropriate towards a resident.

**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 residents are treated with courtesy and respect and in a way that fully recognizes their individuality and respects their dignity, to be implemented voluntarily.*

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**WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care**

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

**s. 6. (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,**

**(a) the planned care for the resident;**

**(b) the goals the care is intended to achieve; and**

**(c) clear directions to staff and others who provide direct care to the resident. 2007, c. 8, s. 6 (1).**

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**Findings/Faits saillants :**

1. The licensee did not ensure that residents' written plans of care provide clear directions to staff and others who provide direct care to the residents.

- The plan of care for an identified resident noted the resident is dependent in wheelchair for mobility. It was observed and staff confirmed the resident ambulates with a rollator.

- On May 6, 2012, the written plan of care of an identified resident did not include directions related to the twice daily application of herbal cream to the resident's feet. A registered staff member reported the personal support workers apply the cream twice daily; another registered staff member reported the registered staff apply the cream; a personal support worker reported she was not aware the resident had herbal cream applied to her feet; another personal support worker reported the registered staff give her the herbal cream to apply.



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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 the written plan of care for each resident sets out clear directions to staff and others who provide direct care to the resident, to be implemented voluntarily.*

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**WN #3: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 76. Training**  
Specifically failed to comply with the following subsections:

s. 76. (2) Every licensee shall ensure that no person mentioned in subsection (1) performs their responsibilities before receiving training in the areas mentioned below:

1. The Residents' Bill of Rights.
2. The long-term care home's mission statement.
3. The long-term care home's policy to promote zero tolerance of abuse and neglect of residents.
4. The duty under section 24 to make mandatory reports.
5. The protections afforded by section 26.
6. The long-term care home's policy to minimize the restraining of residents.
7. Fire prevention and safety.
8. Emergency and evacuation procedures.
9. Infection prevention and control.
10. All Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee, that are relevant to the person's responsibilities.
11. Any other areas provided for in the regulations. 2007, c. 8, s. 76. (2).

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**Findings/Faits saillants :**

1. The licensee has not ensured that staff receive training on the home's policy to promote zero tolerance of abuse prior to performing their responsibilities. Interviews with staff and a review of in-service training records revealed 3 out of 4 staff members had not received training on the home's abuse policy LTCE-RCA-E002, effected July 2010 prior to performing their responsibilities.

**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 all staff at the home have received training, as required, in the home's policy to promote zero tolerance of abuse and neglect of residents prior to performing their responsibilities, to be implemented voluntarily.*

Issued on this 5th day of June, 2012



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

Gloria O'Neil