

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

**Rapport d'inspection en vertu de
la Loi de 2007 sur les foyers de
soins de longue durée**

**Long-Term Care Operations Division
Long-Term Care Inspections Branch**

**Division des opérations relatives aux
soins de longue durée
Inspection de soins de longue durée**

Central East Service Area Office
33 King Street West, 4th Floor
OSHAWA ON L1H 1A1
Telephone: (905) 440-4190
Facsimile: (905) 440-4111

Bureau régional de services de
Centre-Est
33, rue King Ouest, étage 4
OSHAWA ON L1H 1A1
Téléphone: (905) 440-4190
Télécopieur: (905) 440-4111

Public Copy/Copie du rapport public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Jul 8, 2020	2020_838760_0011	007494-20	Complaint

Licensee/Titulaire de permis

AXR Operating (National) LP, by its general partners
c/o Revera Long Term Care Inc. 5015 Spectrum Way, Suite 600 MISSISSAUGA ON
L4W 0E4

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

Bay Ridges
900 Sandy Beach Road PICKERING ON L1W 1Z4

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

JACK SHI (760)

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): July 2, 3, 6, 7, 2020-
Conducted off-site**

**Log #007494-20 related to withholding approval for admission of applicant #001,
had been inspected.**

**During the course of the inspection, the inspector reviewed records and
interviewed staff and public health departments.**

**During the course of the inspection, the inspector(s) spoke with the Central Local
Health Integration Network (CELHIN) Placement Coordinator, Regional Infection
Prevention and Control (IPAC) Specialist from Public Health Ontario, the Director of
Care (DOC), Resident Service Coordinator (RSC), Executive Director (ED),
Environmental Inspector Consultant and the Senior Public Health Inspector from
Durham Region Health Department.**

**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)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<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).**

Findings/Faits saillants :

1. The licensee had failed to comply with s. 44 (7) of the Long-Term Care Homes Act (LTCHA) whereby the licensee refused the application of applicant #001 for reasons other than provided for in the LTCHA.

The Ministry of Long-Term Care (MLTC) received a complaint related to the home withholding approval for admission of applicant #001.

At the time of this inspection, applicant #001 remained at the hospital.

A review of applicant #001's LHIN health assessment from an identified date, revealed the applicant had an identified medical condition, and required modified care provisions.

In an interview with CELHIN Placement Coordinator, they indicated that applicant #001 had selected Bay Ridges as one of their choices and a conditional acceptance was given to applicant #001, however, this was revoked at a later date and they were denied admission to the home.

A record review of the denial of admissions letter indicated that the proper accommodations were matched to applicant #001, however, the home indicated reasons why they did not have the physical facilities required to meet the applicant's care needs related to their identified medical condition.

**Inspection Report under
the Long-Term Care
Homes Act, 2007****Rapport d'inspection en vertu de
la Loi de 2007 sur les foyers de
soins de longue durée**

A review of applicant #001's application including their health assessments indicated that the hospital had recommended measures to be in place to manage their medical condition, which were referenced to in the home's denial of admissions letter to applicant #001. However, the home did not mention the changes that occurred in applicant #001's medical condition in their denial admission letter, which were also on their health assessments.

Inspector #760 interviewed and emailed a Senior Public Health Inspector from Durham Regional Public Health and Regional Infection Prevention and Control (IPAC) Specialist from Public Health Ontario related to the reasons addressed by the home to applicant #001 related to their medical condition and how the home does not have the physical facilities required to meet their needs. They indicated that the home should be able to manage applicant #001's medical condition through IPAC measures that the home could implement. Furthermore, they indicated that some of the IPAC measures undertaken at the hospital for applicant #001's medical condition were not necessarily required to be followed and could be modified for a long term care home environment. Staff of the home would need to be educated on the measures that need to be in place to manage applicant #001's medical condition.

An interview with DOC #102, ED #104 and RSC #103 confirmed that the home currently has other residents that have diagnosed medical conditions similar to applicant #001. Inspector #760 discussed the rationales mentioned in their denial of admissions to applicant #001 with DOC #102, ED #104 and RSC #103. They could not confirm whether the equipment used by the home would meet the medical needs of applicant #001. However in a separate interview, Environmental Inspector #120 confirmed the equipment used by the home would meet the medical needs of applicant #001. The home confirmed that they could not conduct an onsite visit to applicant #001 in the hospital and indicated the assessment conducted by CELHIN may not have been accurate at reflecting applicant #001's current medical condition. Inspector also asked the interviewees if they can modify the way they provide care to applicant #001 should they be admitted to the home and they indicated that they were not aware on whether applicant #001 expressed any wishes to have their care provided a certain way and that the home would be able to meet the care needs of applicant #001 in a modified manner.

As per record reviews, interviews and emails with Public Health departments and an environmental consultant, there was not enough information to substantiate that the home lacked the physical facilities necessary to meet the applicant's care requirements.

The licensee had failed to comply with s. 44 (7) of the Long-Term Care Homes Act (LTCHA) whereby the licensee refused the application of applicant #001 for reasons other than provided for in the LTCHA. [s. 44. (7) (a)]

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 licensee 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; (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or (c) circumstances exist which are provided for in the regulations as being a ground for withholding approval, to be implemented voluntarily.

Issued on this 9th day of July, 2020

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

Original report signed by the inspector.