



Ministry of Health and
Long-Term Care

Ministère de la Santé et
des Soins de longue durée

Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007*, S.O. 2007, c.8

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

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 performance et de la conformité

Public Copy/Copie du public

Name of Inspector (ID #) /

Nom de l'inspecteur (No) : TAMMY SZYMANOWSKI (165), BARBARA NAYKALYK
-HUNT (146), GILLIAN TRACEY (130), LISA VINK (168)

Inspection No. /

No de l'inspection : 2013_202165_0011

Log No. /

Registre no: H-000407-13

Type of Inspection /

Genre d'inspection: Resident Quality Inspection

Report Date(s) /

Date(s) du Rapport : Aug 21, 2013

Licensee /

Titulaire de permis : BELLA SENIOR CARE RESIDENCES INC.
1000 FINCH AVENUE WEST, SUITE 901, TORONTO,
ON, M3J-2V5

LTC Home /

Foyer de SLD : BELLA SENIOR CARE RESIDENCES INC.
8720 Willoughby Drive, NIAGARA FALLS, ON, L2G-7X3

Name of Administrator /

**Nom de l'administratrice
ou de l'administrateur :** BRENDA HARKER

To BELLA SENIOR CARE RESIDENCES INC., you are hereby required to comply
with the following order(s) by the date(s) set out below:



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Order # / Ordre no : 001	Order Type / Genre d'ordre : Compliance Orders, s. 153. (1) (a)
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Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 6. (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan. 2007, c. 8, s. 6 (7).

Order / Ordre :

The licensee shall ensure that the care set out in the plan of care is provided to all residents, including residents #585, #528, #300, and #523, as specified in their plans of care

Grounds / Motifs :

1. The plan of care for resident #523 indicated the resident was high risk for falls and required a crash mat on the floor when in bed. The resident was observed in bed on two occasions and there was no crash mat observed on the floor. Front line staff interviewed stated the resident did not have a crash mat, however, registered staff interviewed, stated the resident was high risk and required it. (130)
2. The plan of care for resident #528 indicated, the resident was at risk for falls. Staff were to leave bed rails down to prevent the resident from climbing over. During the inspection, the resident was observed in bed with one half bed rail raised on the right side of the bed. Staff interviewed stated the resident always had one bed rail raised. (130)
3. Resident #300 had a specialized diet order. The plan of care for high nutritional risk indicated for staff to provide the specialized diet based on a specialized menu plan. Interview with the RD confirmed that the resident was to be offered the planned specialized menu first and if the resident chose not to follow it, then staff had a regular menu highlighted in the dining room that indicated what menu choices off the regular menu that the resident could be offered. The planned specialized menu was not offered to the resident during the lunch meal July 17, 2013. The resident was only offered the regular planned



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menu choices for entrees and desserts which did not correspond with the highlighted menu choices. (165)

4. The plan of care for resident #528 indicated, the resident required extensive assistance with personal hygiene and grooming, including shaving. The resident was observed and had facial hair growth. According to POC records and staff interviewed, the resident did not receive assistance with shaving as required. (130)

5. The licensee did not ensure that the care set out in the plan of care was provided to the resident as specified in the plan. Resident #585's plan of care for falls indicated the resident's call bell would be within reach at all times. The resident's call bell was hanging at the point of activation however; the resident was sitting at the other end of the room in their recliner. Staff confirmed that placing the call bell within reach of the resident was a current intervention to prevent falls however; it was not placed within reach of the resident when observed. (165)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Sep 06, 2013



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Order # / Ordre no : 002	Order Type / Genre d'ordre : Compliance Orders, s. 153. (1) (a)
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Pursuant to / Aux termes de :

O.Reg 79/10, s. 33. (1) Every licensee of a long-term care home shall ensure that each resident of the home is bathed, at a minimum, twice a week by the method of his or her choice and more frequently as determined by the resident's hygiene requirements, unless contraindicated by a medical condition. O. Reg. 79/10, s. 33 (1).

Order / Ordre :

The licensee shall ensure that all residents in the home are bathed, at a minimum of twice a week by the method of their choice, unless contraindicated by a medical condition. When a resident is not bathed according to the bathing schedule, for reasons other than refusal or absences from the home, the missed bath is to be scheduled within the week, to meet the hygiene requirements of the resident.

Grounds / Motifs :

1. Resident #538 reported that they did not always receive twice weekly showers on Thursdays and Sundays as scheduled which was also reported by their family member. The resident confirmed that they had not received a shower on their scheduled day because the home was short two staff members. POC records revealed that over a one month period the resident received a bath, bed bath or shower only three of the scheduled eight times and there were no refusals documented. (146)

2. Resident #528 was observed to be unclean and ungroomed; nails were unclean and untrimmed, they were unshaven and hair did not appear clean. According to the plan of care, they were to receive a shower on Thursdays and Saturdays. The bath records indicated the resident received four showers and one bed bath over a 20 day period. There were no refusals recorded in POC or in the progress notes. Front line staff interviewed stated the resident required extensive assistance for hygiene, grooming and bathing. Staff verified the resident did not receive two baths per week during the identified time period.



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(130)

3. Resident #535 did not receive, at a minimum, two baths per week. POC records confirmed that the resident did not receive a bath for two identified weeks, and only received one bath per week for two identified weeks. It was noted that baths were not rescheduled for another time and the resident only had one refusal noted during this time. (165)

4. Review of POC for resident #564 confirmed the resident did not receive two baths per week. The resident did not receive a bath for one week on two occasions, and only received one bath per week, on two occasions. During an interview the resident confirmed that they did not receive two baths per week and that they did not receive a bath which was the method of their choice. The resident's plan of care for bathing indicated that the resident would only have a bath in the car tub and the bathing schedule indicated the resident was to receive a bath using the car tub. The tub was monitored for a two week period and was noted to not be used during this time despite staffs confirmation that the tubs were operational. POC documentation confirmed that the resident received showers on three occasions during this time despite their preference for a bath. (165)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Sep 06, 2013



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REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

Director
c/o Appeals Coordinator
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603



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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the Director

Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

Director
c/o Appeals Coordinator
Performance Improvement and Compliance
Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.



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RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

La demande de réexamen doit être présentée par écrit et est signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au titulaire de permis.

La demande de réexamen doit contenir ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le titulaire de permis souhaite que le directeur examine;
- c) l'adresse du titulaire de permis aux fins de signification.

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



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En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la
conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this 21st day of August, 2013

**Signature of Inspector /
Signature de l'inspecteur :**

**Name of Inspector /
Nom de l'inspecteur :** TAMMY SZYMANOWSKI

**Service Area Office /
Bureau régional de services :** Hamilton Service Area Office