

**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**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Apr 23, 2021	2021_671684_0001	003387-21	Complaint

Licensee/Titulaire de permis

The Board of Management for the District of Nipissing East
400 Olive Street North Bay ON P1B 6J4

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

Cassellholme
400 Olive Street North Bay ON P1B 6J4

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

SHELLEY MURPHY (684)

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): March 16-19, and 22-23, 2021, as an off-site inspection.

The following intake was completed in this complaint inspection:

- An intake related to a complaint that had been submitted to the Director for a refusal to accept a resident application.

An Other inspection #2021_671684_0002 was conducted concurrently with this Complaint inspection.

During the course of the inspection, the inspector(s) spoke with the Director of Care (DOC), Clinical Manager, Registered Practical Nurse (RPN) team lead, Local Health Integration Network (LHIN) Admissions Coordinator and LHIN Care Coordinator.

The inspector reviewed resident's health care records, home policies and procedures, Directive#3 for Long-Term Care Homes under the Long-Term Care Homes Act, 2007, and external care provider documents.

**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)

0 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 has failed to approve applicant #001's admission application to the home.

The Long Term Care Home (LTCH) did not approve applicant #001's application on three different occasions in 2020. The licensee cited challenges with the applicant's ability to self isolate for 14 days as the reason.

"The Chief Medical Officer of Health (CMOH) issued Directive #3, last updated December 7, 2020, which indicated "Individuals who may have challenges with isolation due to a medical condition (e.g., dementia) should not be denied admission or transfer on this basis alone. LTCHs should take all precautions to ensure the completion of the required 14-day isolation period for new or transferred residents to the best of the LTCH's ability."

The Director of Care (DOC), indicated that applicant #001 was not approved for admission on three occasions due to their inability to isolate.

Sources: The NE LHIN Client notes dated; interviews with RPN team lead, DOC; and Directive #3 for LTCH under the Long-Term Care Homes Act, 2007, last updated December 7, 2020. [s. 44. (7)]

Issued on this 28th day of April, 2021

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

Original report signed by the inspector.