



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  
prévus 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  
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jun 7, 8, 2011	2011_024137_0012	Critical Incident

**Licensee/Titulaire de permis**

THE CORPORATION OF THE CITY OF LONDON  
c/o Dearness Home for Senior Citizens, 710 Southdale Road East, LONDON, ON, N6E-1R8

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

DEARNESS HOME FOR SENIOR CITIZENS  
710 SOUTHDALE ROAD EAST, LONDON, ON, N6E-1R8

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

MARIAN MACDONALD (137)

**Inspection Summary/Résumé de l'inspection**

The purpose of this inspection was to conduct a Critical Incident inspection.

During the course of the inspection, the inspector(s) spoke with Acting Director and Director of Care.

During the course of the inspection, the inspector(s) reviewed resident's clinical records, internal investigative reports and relevant policies and procedures.

The following Inspection Protocols were used in part or in whole during this inspection:

Findings of Non-Compliance were found during this inspection.

**NON-COMPLIANCE / NON-RESPECT DES EXIGENCES**

**Definitions**

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

**Définitions**

WN – Avis écrit  
VPC – Plan de redressement volontaire  
DR – Aiguillage au directeur  
CO – Ordre de conformité  
WAO – Ordres : travaux et activités



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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.

**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 24. Reporting certain matters to Director**

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

**s. 24. (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Director:**

- 1. Improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident.**
- 2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident.**
- 3. Unlawful conduct that resulted in harm or a risk of harm to a resident.**
- 4. Misuse or misappropriation of a resident's money.**
- 5. Misuse or misappropriation of funding provided to a licensee under this Act or the Local Health System Integration Act, 2006. 2007, c. 8, ss. 24 (1), 195 (2).**

**Findings/Faits sayants :**

- 1. The Licensee did not immediately report, to the Director, the suspicion of improper or incompetent treatment or care of a resident that resulted in harm or risk of harm to the resident.**

**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 8. Policies, etc., to be followed, and records**

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

**s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,**

- (a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and**
- (b) is complied with. O. Reg. 79/10, s. 8 (1).**

**Findings/Faits sayants :**

- 1. Registered staff did not follow the documentation policy and procedure, related to the identified incident, as indicated in the Home's Documentation Guidelines - Pg. D-8 - Date 060327**

Levels of interventions and Health Care Directive - Pg L-3 - Date 040310

There is no list available on each unit for quick reference, identifying residents with a Level 4 intervention, as indicated in the policy and this policy is no longer being utilized.

**Issued on this 8th day of June, 2011**



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

*Maureen C. Donaldson*