



**Ministry of Health and  
Long-Term Care**

**Ministère de la Santé et des Soins  
de longue durée**

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

**Rapport d'inspection prévue  
sous la Loi de 2007 sur les foyers  
de soins de longue durée**

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

**Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée**

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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Oct 25, Nov 8, 2018	2018_605213_0018	005873-18	Complaint

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**Licensee/Titulaire de permis**

The Corporation of the City of London  
355 Wellington St, 2nd Floor, Suit 248 LONDON ON N6A 3N7

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

Dearness Home for Senior Citizens  
710 Southdale Road East LONDON ON N6E 1R8

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

RHONDA KUKOLY (213)

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

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

**This inspection was conducted on the following date(s): October 15, 16, 17, 18, 19, 2018**

**Inspector #435 participated in this complaint inspection.**

**This complaint inspection log #005873-18 related to bed refusal was completed concurrently while in the home completing two critical incident inspections, #2018\_605213\_0017 and #2017\_605213\_0019**

**During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, three Associate Directors of Care, a Social Worker, a Local Health Integration Network Manager and Case Manager, a Unit/Admissions Clerk and a family member.**

**The Inspectors also reviewed health records and other relevant documentation.**

**The following Inspection Protocols were used during this inspection:**

**Admission and Discharge**

**Hospitalization and Change in Condition**

**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).**

**s. 44. (9) If the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out,**

**(a) the ground or grounds on which the licensee is withholding approval; 2007, c. 8, s. 44. (9).**

**(b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; 2007, c. 8, s. 44. (9).**

**(c) an explanation of how the supporting facts justify the decision to withhold approval; and 2007, c. 8, s. 44. (9).**

**(d) contact information for the Director. 2007, c. 8, s. 44. (9).**

### **Findings/Faits saillants :**

1. The licensee has failed to ensure that the home approved the applicant's admission to the home unless, (a) the home lacked the physical facilities necessary to meet the applicant's care requirements; (b) the staff of the home lacked the nursing expertise necessary to meet the applicant's care requirements; or (c) circumstances existed which are provided for in the regulations as being a ground for withholding approval.

A complaint was received by the Ministry of Health and Long-Term Care related to an identified applicant being refused admission.

Application documentation was reviewed during the inspection including a Behavioural Assessment Tool and other assessments completed by the South West Local Health Integration Network (SWLHIN). There was no refusal letter related to the application for



the first requested date; there was a refusal letter related to the application from the home to the applicant dated two months after the first identified request.

The refusal letter that dated two months after the requested date indicated: We are unable to offer admission at this time. In your application, it has been noted that you present behavioural and medical challenges to your care team continue to work with you towards improving your quality of life. Some areas of specific concern include your physical and verbal aggression and resistance to care. It is noted that your behaviours can be triggered by multiple factors to a point where you have injured your care provider. The documentation provided also indicated that there has been some improvements. As care providers we understand that it would take some time before there is satisfactory stability in your current state. In addition to the fact that the home area you applied for is heavily challenged with current residents, our home lacks the nursing expertise and resources required to provide safe care for you at this time.

The Behavioural Assessment Tool completed by the SWLHIN indicated:

- Agitated Behaviour (state of restlessness, nagging, pleading, inability to relax often accompanied by restlessness activity, repetitiveness, unrealistic fears, i.e. abandonment – never.
- Verbally Aggressive/Angry Behaviour (cursing, swearing, use of obscenity, profanity, etc. – different from normal behaviour) – Displays anger or is verbally abusive in predictable situation i.e. when provoked, frequency – behaviour occurred within one year but not present within three months. Past history of client being verbally inappropriate with caregivers when they provide care. Behaviour is more so reported to be defensive behaviour, it only occurs if having a trigger, once trigger is removed, behaviour is not present, client is very polite.
- Physically Aggressive/Angry Behaviour (spitting, kicking, grabbing, pushing, throwing objects, hitting self and others, etc.) – Displays anger or is verbally aggressive in predictable situation i.e. when provoked, frequency – less than once a week. History of grabbing/holding caregiver's hand, attempting striking motion when caregiver provides personal care (striking behaviour is not reported in at least two months). Once client was diagnosed and started receiving treatment, behaviour is no longer witnessed, at least not within past three months from South West LHIN Personal Support Worker (PSW) providers, as behaviour was not reported at home. Still resistive, may hold caregivers hand for few seconds, but will let go when asked.

In a staff interview with the Behavioural Supports Ontario (BSO) Personal Support Worker (PSW) by Inspector #615, they said the home does have an interdisciplinary



BSO team. They have a referral process for BSO and any staff can refer to BSO to help manage residents with responsive behaviours.

The Associate Director of Care (ADOC) said that they are responsible for reviewing applications for admission and accepting or refusing them. They said that the applicant was refused admission based on a fear that this person had the potential to physically harm staff; that the applicant had been refused by a number of other homes and had issues at another home. When the Inspector asked the DOC if the home currently had residents with agitation, verbal and physical aggression, they said yes. When asked if they were managing these residents and their responsive behaviours with the staff of the home and the home's BSO program, they said yes.

The Director of Care (DOC) said that they were unaware if a letter had been sent to the applicant or their Power of Attorney and were not able to find one related to the admission application. When the inspector asked the DOC if the home currently had residents with agitation, verbal and physical aggression, they both said yes. When asked if they were managing these residents and their responsive behaviours with the staff of the home and the home's BSO program, they said yes. The DOC said that they were not aware of why the applicant was refused admission.

The Social Worker said that the applicant's family member called the home and requested that the home reconsider the application. The Social Worker said that there was a telephone meeting set up with the LHIN, before the admission was requested, where the application was discussed and the request to reconsider the application. The Social Worker said it was discussed that the family member had refused recommended medication changes and the LHIN Case Manager would speak to the family member about this. They said that the applicant was refused admission based on a fear that this person had the potential to physically harm staff as well as that a family member had refused recommended medications. The Social Worker said that the home does have a BSO program internally and does also receive support from external resources such as the Behavioural Response Team to assist them in managing residents with responsive behaviours. The Social Worker also said that they were unaware if a letter had been sent to the applicant and were not able to find one related to the admission application.

The applicant's family member shared that the home refused the application because of behaviours. They said that there were no behaviours while at home and that they were willing to provide a disclosed number of PSW service hours privately paid for to support the home and that they had not refused any medication changes. The family member



said that they had commitments that had to be cancelled as a result of the refusal. When the Inspector asked if the family member still wanted admission to the home, they said no, they did not. The family member said that they would have wanted the Inspector to order the home to accept the applicant at the time of the application, but now, they would not accept an offer of admission to the home.

The LHIN Case Manager shared that the home had initially accepted the application, then two to three days later, refused the application. The Case Manager said that the applicant was being cared for with no documented behaviours. The Case Manager said that an external resource was involved with the applicant's care prior to the requested date, but were no longer involved as medication changes were made, a care plan was in place and was effective, the goals were met and there was no need for further involvement. The Case Manager said that they appealed to the home to reconsider the application as they did not believe that the home did not have the staff expertise or the facilities to meet this applicant's needs.

The licensee has failed to ensure that the home approved an application for admission to the home on two occasions unless the home lacked the physical facilities necessary to meet the applicant's care requirements; the staff of the home lacked the nursing expertise necessary to meet the applicant's care requirements; or circumstances existed which are provided for in the regulations as being a ground for withholding approval. [s. 44. (7)]

2. The licensee has failed to ensure that when the licensee withheld approval for admission, the licensee gave written notice to the applicant, the Director and the Placement Coordinator, setting out the ground or grounds on which the licensee withheld approval; a detailed explanation of the supporting facts, as they related both to the home and to the applicant's condition and requirements for care; an explanation of how the supporting facts justified the decision to withhold approval; and contact information for the Director.

A complaint was received by the Ministry of Health and Long-Term Care (MOHLTC) related to a person being refused admission to the home. The MOHLTC Central Intake and Triage Team (CIATT) is responsible for receiving written notifications of withholding approval for admission on behalf of the Director.

Application documentation was reviewed during the inspection including a Behavioural



Assessment Tool and other assessments completed by the South West Local Health Integration Network (SWLHIN). There was no refusal letter related to the application for the first requested date; there was a refusal letter related to the application from the home to the applicant dated two months after the first identified request.

The Associate Director of Care (ADOC) said that they were responsible for reviewing applications for admission and accepting or refusing them. They said that the applicant was refused admission based on a fear that this person had the potential to physically harm staff; that the applicant had been refused by a number of other homes and had issues during a stay at another home. The ADOC was unsure if a letter had been sent for the bed refusal and was not able to locate one.

The Director of Care (DOC) said that they were unaware if a letter had been sent to the applicant and were not able to find one related to the application. The DOC said that they were not aware of why the applicant was refused admission. The DOC was unsure if a letter had been sent for the bed refusal and was not able to locate one.

The Social Worker said that the applicant was refused admission based on responsive behaviours and a fear that this person had the potential to physically harm staff. The Social Worker also said that they were unaware if a letter had been sent to the applicant and were not able to find one related to the application.

A MOHLTC Central Intake and Triage Team (CIATT) Administrative Assistant shared that CIATT did not receive a refusal letter related to the initial application.

A family member shared that the home refused the application because of behaviours. They said that there were no behaviours while at home and that they were willing to provide an identified number of Personal Support Worker (PSW) service hours privately paid for to support the home and that they had not refused any medication changes. The family member said that they had commitments that had to be cancelled as a result of the refusal. When the Inspector asked if the complainant still wanted admission to the home, they said no, they did not. The family member said that they would have wanted the Inspector to order the home to accept the applicant at the time of the application, but now, they would not accept an offer of admission.

The LHIN Case Manager shared that they reviewed the LHIN's electronic records and there was no written notification of the refusal, the grounds for withholding approval, a detailed explanation of the supporting facts or contact information for the Director, for the





application for first admission. They said that they had a letter dated two months after the first application, but that this was for another application for subsequent admission for three months after the first that was also refused.

The licensee has failed to ensure that when the licensee withheld approval for admission, the licensee gave written notice to the applicant, the Director and the Placement Coordinator, setting out the ground or grounds on which the licensee withheld approval; a detailed explanation of the supporting facts, as they related both to the home and to the applicant's condition and requirements for care; an explanation of how the supporting facts justified the decision to withhold approval; and contact information for the Director.  
[s. 44. (9)]

***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 home approves 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 lacks 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 and;***

***to ensure that if the licensee withholds approval for admission, the licensee gives to the applicant, the Director and the Placement Coordinator, the ground or grounds on which the licensee is withholding approval; a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; an explanation of how the supporting facts justified the decision to withhold approval; and contact information for the Director, to be implemented voluntarily.***



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**Issued on this 15th day of November, 2018**

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

**Original report signed by the inspector.**