



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

**Rapport d'inspection
prévue le *Loi de 2007
les foyers de soins de
longue durée***

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

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Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
conformité

Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
October 6 and 7, 2010	2010_147_2745_05Oct151819	Complaint – H-01098 and H-01441
Licensee/Titulaire Holland Christian Homes Inc. 7900 McLaughlin Road South Brampton, ON L6Y 5A7		
Long-Term Care Home/Foyer de soins de longue durée Faith Manor 7900 McLaughlin Road South Brampton, ON L6Y 5A7		
Name of Inspector Laleh Newell - #147		
Inspection Summary/Sommaire d'inspection		

The purpose of this inspection was to conduct a Critical Incident inspection related to improper transferring, allegation of abuse and refusing to provide care by staff.

During the course of the inspection, the inspector spoke with:

Director of Care, Assistance Director of Care, resident and spouse, physiotherapist and staff on the unit.

During the course of the inspection, the inspector:

Reviewed resident's clinical chart, reviewed home's policy and procedure related to abuse and transferring, reviewed internal incident and investigation reports, observed care and interviewed staff on the unit.

The following Inspection Protocols were used during this inspection:

Prevention of Abuse and Neglect

Findings of Non-Compliance were found during this inspection. The following action was taken:

[1] WN

[1] VPC

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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.)

Le suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with – O.Reg. 79/10, s. 36
Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents.

Findings:

1. An identified resident had been assessed by physiotherapist to require two person transfers at all times. However, staff on the unit are requesting the resident to utilize the resident's bedside table to assist with transferring and weight bearing while being assisted by the staff to be transferred. This method of transferring has placed the resident at risk for harm and injury.

Inspector ID #: 147

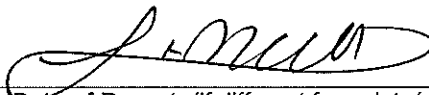
VPC - pursuant to the *Long-Term Care Homes Act, 2007*, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure all staff use safe transferring and techniques when transferring all residents, to be implemented voluntarily.

Signature of Licensee or Representative of Licensee
Signature du Titulaire du représentant désigné

Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.

Title:

Date:

 Nov 24/10.
Date of Report: (if different from date(s) of inspection).