

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

Ministère de la Santé et des Soins de longue durée

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

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

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Report Date(s) /

Inspection No / Date(s) du apport No de l'inspection Loa #/ No de registre

Type of Inspection / **Genre d'inspection**

Apr 26, 2018

2018 556168 0001

002202-18, 004924-18 Complaint

Licensee/Titulaire de permis

Foyer Richelieu Welland 655 Tanguay Ave WELLAND ON L3B 6A1

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

Fover Richelieu Welland 655 Tanguay Avenue WELLAND ON L3B 6A1

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs LISA VINK (168)

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): March 9, 2018 and April 25, 2018 (off-site).

This off-site inspection was completed regarding complaint inspections: 02202-18 - regarding Director of Nursing and Personal Care; and 04924-18 - regarding Director of Nursing and Personal Care.

During the course of the inspection, the inspector(s) spoke with the Administrator and acting Director of Nursing and Personal Care.

During the course of this off-site inspection, the inspector interviewed staff and reviewed the licences for the long-term care home.

The following Inspection Protocols were used during this inspection: Sufficient Staffing

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)



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NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
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 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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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 O.Reg 79/10, s. 213. Director of Nursing and Personal Care



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Specifically failed to comply with the following:

- s. 213. (1) Every licensee of a long-term care home shall ensure that the home's Director of Nursing and Personal Care works regularly in that position on site at the home for the following amount of time per week:
- 1. In a home with a licensed bed capacity of 19 beds or fewer, at least four hours per week. O. Reg. 79/10, s. 213 (1).
- 2. In a home with a licensed bed capacity of more than 19 but fewer than 30 beds, at least eight hours per week. O. Reg. 79/10, s. 213 (1).
- 3. In a home with a licensed bed capacity of more than 29 but fewer than 40 beds, at least 16 hours per week. O. Reg. 79/10, s. 213 (1).
- 4. In a home with a licensed bed capacity of more than 39 but fewer than 65 beds, at least 24 hours per week. O. Reg. 79/10, s. 213 (1).
- 5. In a home with a licensed bed capacity of 65 beds or more, at least 35 hours per week. O. Reg. 79/10, s. 213 (1).

Findings/Faits saillants:



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The licensee failed to ensure that the Director of Nursing and Personal Care (DONPC) worked regularly in that position on site for at least the following amount of time per week, in a home with 65 or more licensed beds, at least 35 hours.

Foyer Richelieu is a long-term care home which currently operates 65 long-term care beds.

Interview with the Administrator identified that the home had 62 "regular" beds and three (3) interim beds, for a total of 65 beds.

The home was provided with a temporary licence #3022-T02, with an effective date of July 1, 2015, until March 31, 2019, to operate one (1) interim bed and a second temporary licence #3022-T03, with an effective date of August 1, 2015, until March 31, 2019, to operate two (2) interim beds.

Staff member #100 identified that they were the acting DONPC, that they had been in the role, since approximately October 2017 and that they currently worked in the position 22.5 hours a week, in addition to working as a Registered Nurse (RN) in the home.

The Administrator provided clarification that the acting DOCPC was paid for 22.5 hours a week; however, was onsite for 24 hours a week, including unpaid nutrition breaks, which was consistent with the requirement of a home with 40 to 64 beds.

The Administrator confirmed that the acting DOCPC did not work regularly in the position for at least 35 hours a week.

Approximately one month later, the Administrator communicated that effective May 1, 2018, the acting DONPC would work in the position 35 hours a week, consistent with the regulation for a home with 65 long-term care beds.

The licensee failed to ensure that the DONPC worked regularly in that position for at least 35 hours since approximately October 2017. [s. 213. (1)]



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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 Director of Nursing and Personal Care (DONPC) works regularly in that position on site for at least the following amount of time per week, in a home with 65 or more licensed beds, at least 35 hours, to be implemented voluntarily.

Issued on this 26th day of April, 2018

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

Original report signed by the inspector.