



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

Toronto Service Area Office
5700 Yonge Street 5th Floor
TORONTO ON M2M 4K5
Telephone: (416) 325-9660
Facsimile: (416) 327-4486

Bureau régional de services de
Toronto
5700 rue Yonge 5e étage
TORONTO ON M2M 4K5
Téléphone: (416) 325-9660
Télécopieur: (416) 327-4486

Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Feb 21, 2019	2019_641665_0003	022491-17, 026080-18	Complaint

Licensee/Titulaire de permis

City of Toronto
55 John Street Metro Hall, 11th Floor TORONTO ON M5V 3C6

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

Fudger House
439 Sherbourne Street TORONTO ON M4X 1K6

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

JOY IERACI (665)

Inspection Summary/Résumé de l'inspection



**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***

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

This inspection was conducted on the following date(s): February 7, 8, 13, 14, 15 and 19, 2019. Off site February 12, 2019.

The following complaint intakes were inspected:

- Log #022491-17 related to staff to resident abuse, maintenance services and Residents' Bill of Rights**
- Log #026080-18 related to withholding approval for admission to the home**

During the course of the inspection, the inspector(s) spoke with the administrator and the complainant.

The following Inspection Protocols were used during this inspection:

- Accommodation Services - Maintenance**
- Dignity, Choice and Privacy**
- Prevention of Abuse, Neglect and Retaliation**

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 an applicant's admission to the home was approved after a review of the assessments and information provided by the placement co-ordinator unless, (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements.

The Ministry of Health and Long Term Care (MOHLTC) received a complaint on an identified month in 2018, related to withholding approval for admission of #032's application to the home.

A review of the written notice from the home stated the reason for withholding approval was that the home lacked the nursing expertise to manage the applicant's care needs.



The notice indicated the applicant's identified diagnoses and two identified behaviours that would pose a safety risk and potential harm to the applicant and to others, and the home was not able to meet their duty to protect other residents should the applicant be admitted.

A review of the placement co-ordinator's application on an identified date in 2018, indicated the applicant did not exhibit one of the two identified behaviours in the past year.

An interview with the home's administrator indicated the nursing staff did not have the nursing expertise or resources to manage the resident's behaviours. The administrator indicated that the applicant's identified behaviours would affect the home's duty to protect.

The administrator stated that the home does have residents currently residing in the home with the applicant's diagnoses and/or behaviours.

The administrator further indicated that the home has a responsive behaviour program in place which included a registered staff who is the behavioural support lead, a geriatric mental health outreach team (GMOT), a social worker and a psychiatrist who comes to the home to assist staff to manage responsive behaviours. Additionally, the administrator stated direct care staff receives responsive behaviour training, other identified training and that there are registered staff and personal support workers (PSWs) who are trained on physical, intellectual, emotional, capabilities, environment, and social (PIECES) and on the gentle persuasive approach (GPA).

From interviews conducted and record reviews completed, the inspector concluded that the behaviour program at Fudger House has the appropriate nursing expertise necessary to meet applicant #032's care requirements. [s. 44. (7) (b)]

2. The licensee has failed to ensure that if the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out (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; (c) an explanation of how the supporting facts justify the decision to withhold approval; and (d) contact information for the Director.

A review of the written notice from the home to the applicant stated the reason for



withholding approval was that the home lacked the nursing expertise to manage the applicant's behavioural care needs.

The notice indicated that the home was unable to serve the applicant's needs in a safe and effective manner. Further review of the written notice did not include the Director's contact information.

An interview with the administrator acknowledged that the written notice to the applicant did not provide 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 justify 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 an applicant's admission to the home is approved after a review of the assessments and information provided by the placement co-ordinator unless, (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; and, to ensure that if the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out (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; (c) an explanation of how the supporting facts justify the decision to withhold approval; and (d) contact information for the Director, to be implemented voluntarily.



**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***

Issued on this 25th day of February, 2019

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

Original report signed by the inspector.