



**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

Hamilton Service Area Office
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**Ministère de la Santé et des Soins de
longue durée**

Division de la responsabilisation et de la performance du
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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
April 12, 16, 2012	2012_067171_0009	Critical Incident – H-00627-12

Licensee/Titulaire

Deem Management Service Limited, 2 Queen Street East, Suite 1500, Toronto, ON, M5C 3G5

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

Hamilton Continuing Care, 125 Wentworth Street South, Hamilton ON, L8N 2Z1

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

Elisa Wilson (171)

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a critical incident inspection.

During the course of the inspection, the inspector spoke with: the administrator, assistant director of care, registered staff, personal support workers, and residents.

During the course of the inspection, the inspector: reviewed the plan of care for an identified resident, reviewed inservice training records and identified home policies.

The following Inspection Protocols were used during this inspection:

Prevention of Abuse, Neglect and Retaliation

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

1 WN
1 VPC

PLEASE NOTE: 2 non-compliance were found related to the Licensee's failure to respect and promote resident's rights [LTCHA, s.3(1)1] and to ensure care was provided as per the plan of care [LTCHA, s.6(7)]. These non-compliance were issued in Inspection 2012_067171_0010, conducted on April 12-13, 2012 and are contained in the Report of that inspection.



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 LTCHA, 2007 S.O. 2007, c.8, s.76(4) Retraining

Specifically failed to comply with the following:

s. 76(4) Every licensee shall ensure that the persons who have received training under subsection (2) receive retraining in the areas mentioned in that subsection at times or at intervals provided for in the regulations.

Findings:

1. The licensee had not ensured that all staff had received retraining in the long-term care home's policy to promote zero tolerance of abuse and neglect of residents annually as per regulation s. 219 (1).

Inservice sign-in sheets were reviewed for the year 2011 and it was noted not all staff received training during that year on the home's policy titled Resident Abuse. It was confirmed by the Administrator only the staff working on the day of the inservice would have received the training and there were no procedures in place to ensure all staff received training that year.

Inspector ID #: 171

Additional Required Action:

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 are retrained annually in the areas mentioned in the subsection, specifically the home's policy to promote zero tolerance of abuse and neglect of 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:	Date of Report: (if different from date(s) of inspection).	