



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

**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**

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

Ottawa Service Area Office
347 Preston St Suite 420
OTTAWA ON K1S 3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347 rue Preston bureau 420
OTTAWA ON K1S 3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

Public Copy/Copie du public

Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Oct 7, 2016	2016_505103_0037	011532-16, 025853-16	Complaint

Licensee/Titulaire de permis

THE CORPORATION OF THE COUNTY OF HASTINGS
1M Manor Lane Box #758 BANCROFT ON K0L 1C0

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

HASTINGS MANOR HOME FOR THE AGED
476 DUNDAS STREET WEST P.O. BOX 458 BELLEVILLE ON K8N 5B2

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

DARLENE MURPHY (103)

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): September 26-30, 2016

The following complaint intakes were inspected: logs # 011532-16 (complaint letter) and #025853-16 (resident falls).

During the course of the inspection, the inspector(s) spoke with residents, Personal support workers (PSW), Registered Practical Nurses (RPN), Registered Nurses (RN), the Assistant Director of Care (ADOC), the Director of Care (DOC) and the Administrator.

During the course of the inspection, the inspector observed resident care, made resident observations, and reviewed resident health care records, the home fall prevention program policy and the home's documented record of complaints.

**The following Inspection Protocols were used during this inspection:
Falls Prevention
Reporting and Complaints
Resident Charges**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

0 VPC(s)

1 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>Legendé</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. 91.
Resident charges**



Specifically failed to comply with the following:

s. 91. (1) A licensee shall not charge a resident for anything, except in accordance with the following:

- 1. For basic accommodation, a resident shall not be charged more than the amount provided for in the regulations for the accommodation provided. 2007, c. 8, s. 91 (1).**
- 2. For preferred accommodation, a resident shall not be charged more than can be charged for basic accommodation in accordance with paragraph 1 unless the preferred accommodation was provided under an agreement, in which case the resident shall not be charged more than the amount provided for in the regulations for the accommodation provided. 2007, c. 8, s. 91 (1).**
- 3. For anything other than accommodation, a resident shall be charged only if it was provided under an agreement and shall not be charged more than the amount provided for in the regulations, or, if no amount is provided for, more than a reasonable amount. 2007, c. 8, s. 91 (1).**
- 4. Despite paragraph 3, a resident shall not be charged for anything that the regulations provide is not to be charged for. 2007, c. 8, s. 91 (1).**

Findings/Faits saillants :

1. The following finding relates to Log #025853-16:

The licensee has failed to ensure that resident #001 was not charged for anything that the regulations provide is not to be charged for.

Resident #001's health care record was reviewed and indicated the resident had been assessed as high risk for falls. Resident #001's current plan of care related to falls was reviewed and under "Falls" indicated the following strategies to reduce risk of falls:

- Ensure when resident is in programming that clip alarm is attached and brakes on w/c.
- When resident is attending programming, place close by staff for that time frame for closer monitoring.
- Implement all strategies identified for high risk residents: orientation to room, RHA, ensure common items within reach, bed at lowest position, uncluttered environment, family awareness of appropriate footwear, adequate lighting for tasks, toileting routine, managed pain.
- Review medications for potential fall risks and communicate to physician the findings.



-Resident wears a hip protector garment 24 hrs/day.

Staff were interviewed and confirmed hip protectors were a part of resident #001's plan of care as a fall management strategy.

This inspector was advised by resident #001's family member that they were being charged for the hip protector garments and that the family found this to be a financial burden. The family member indicated the nursing staff and the ADOC had made requests that the hip protectors be purchased and were told they were an important part of resident #001's fall prevention program to reduce the risk of a hip fracture. Resident #001's family member indicated they had recently been asked to supply another pair and that on the last invoice they had questioned an \$80 charge which they were told was for the hip protectors.

O. Reg 79/10, s. 44 states: Every licensee of a long term care home shall ensure that supplies, equipment and devices are readily available at the home to meet the personal care needs of the residents.

The ADOC was interviewed and indicated hip protectors are a part of the home's fall prevention interventions to reduce injury to residents and are implemented by the home for a wide variety of residents as a means of reducing injury to residents who are high risk for falls or for residents at risk of hip fracture. The ADOC indicated family members and residents have always been asked to provide/pay for hip protectors as long as she can remember. The ADOC acknowledged resident #001's family had recently been asked to provide an additional pair of hip protectors and were charged for them.

The DOC was interviewed and also acknowledged that hip protectors were currently a part of the home's fall management program and confirmed that residents/families are being charged for them.

The decision to issue this non compliance as an order was based on the following: The scope of the non-compliance is widespread: According to the ADOC, all residents wearing hip protectors in the home are being charged for them. The ADOC indicated many residents are currently using hip protectors.

The severity of the non-compliance is potential for actual harm. Resident #001's family member reported this charge as being a financial burden, but indicated they felt obligated to provide them as a means of preventing injury to their loved one. Residents and family members are likely to agree to the charge despite being a financial burden out of



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obligation. [s. 91. (1) 4.]

Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".

Issued on this 11th day of October, 2016

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

Original report signed by the inspector.



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Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007, S.O. 2007, c.8*

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée, L.O. 2007, chap. 8*

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

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

Public Copy/Copie du public

Name of Inspector (ID #) /

Nom de l'inspecteur (No) : DARLENE MURPHY (103)

Inspection No. /

No de l'inspection : 2016_505103_0037

Log No. /

Registre no: 011532-16, 025853-16

Type of Inspection /

Genre

Complaint

d'inspection:

Report Date(s) /

Date(s) du Rapport : Oct 7, 2016

Licensee /

Titulaire de permis :

THE CORPORATION OF THE COUNTY OF
HASTINGS

1M Manor Lane, Box #758, BANCROFT, ON, K0L-1C0

LTC Home /

Foyer de SLD :

HASTINGS MANOR HOME FOR THE AGED
476 DUNDAS STREET WEST, P.O. BOX458,
BELLEVILLE, ON, K8N-5B2

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur :

Debbie Rollins

To THE CORPORATION OF THE COUNTY OF HASTINGS, you are hereby required to comply with the following order(s) by the date(s) set out below:



**Ministry of Health and
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Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term Care
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Order # /

Ordre no : 001

Order Type /

Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 91. (1) A licensee shall not charge a resident for anything, except in accordance with the following:

1. For basic accommodation, a resident shall not be charged more than the amount provided for in the regulations for the accommodation provided.
2. For preferred accommodation, a resident shall not be charged more than can be charged for basic accommodation in accordance with paragraph 1 unless the preferred accommodation was provided under an agreement, in which case the resident shall not be charged more than the amount provided for in the regulations for the accommodation provided.
3. For anything other than accommodation, a resident shall be charged only if it was provided under an agreement and shall not be charged more than the amount provided for in the regulations, or, if no amount is provided for, more than a reasonable amount.
4. Despite paragraph 3, a resident shall not be charged for anything that the regulations provide is not to be charged for. 2007, c. 8, s. 91 (1).

Order / Ordre :

The licensee is hereby ordered to:

1. Immediately stop charging resident #001 and/or the resident's substitute decision makers (SDM) for hip protectors.
2. The licensee shall review any and all residents who are currently and/or have previously been charged for hip protectors and reimburse the resident and/or resident's SDM for those charges.

Grounds / Motifs :

1. The licensee has failed to ensure that resident #001 was not charged for anything that the regulations provide is not to be charged for.

Resident #001's health care record was reviewed and indicated the resident had been assessed as high risk for falls. Resident #001's current plan of care related

to falls was reviewed and under "Falls" indicated the following strategies to reduce risk of falls:

- Ensure when resident is in programming that clip alarm is attached and brakes on w/c
- When resident is attending programming, place close by staff for that time frame for closer monitoring.
- Implement all strategies identified for high risk residents: orientation to room, RHA, ensure common items within reach, bed at lowest position, uncluttered environment, family awareness of appropriate footwear, adequate lighting for tasks, toileting routine, managed pain.
- Review medications for potential fall risks and communicate to physician the findings.
- resident wears a hip protector garment 24 hrs/day.

Staff were interviewed and confirmed hip protectors were a part of resident #001's plan of care as a fall management strategy.

This inspector was advised by resident #001's family member that they were being charged for the hip protector garments and that the family found this to be a financial burden. The family member indicated the nursing staff and the ADOC had made requests that the hip protectors be purchased and were told they were an important part of resident #001's fall prevention program to reduce the risk of a hip fracture. Resident #001's family member indicated they had recently been asked to supply another pair and that on the last invoice they had questioned an \$80 charge which they were told was for the hip protectors.

O. Reg 79/10, s. 44 states: Every licensee of a long term care home shall ensure that supplies, equipment and devices are readily available at the home to meet the personal care needs of the residents.

The ADOC was interviewed and indicated hip protectors are a part of the home's fall prevention interventions to reduce injury to residents and are implemented by the home for a wide variety of residents as a means of reducing injury to residents who are high risk for falls or for residents at risk of hip fracture. The ADOC indicated family members and residents have always been asked to provide/pay for hip protectors as long as she can remember. The ADOC acknowledged resident #001's family had recently been asked to provide an



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additional pair of hip protectors and were charged for them.

The DOC was interviewed and also acknowledged that hip protectors were currently a part of the home's fall management program and confirmed that residents/families are being charged for them.

The decision to issue this non compliance as an order was based on the following:

The scope of the non-compliance is widespread: According to the ADOC, all residents wearing hip protectors in the home are being charged for them. The ADOC indicated many residents are currently using hip protectors.

The severity of the non-compliance is potential for actual harm. Resident #001's family member reported this charge as being a financial burden, but indicated they felt obligated to provide them as a means of preventing injury to their loved one. Residents and family members are likely to agree to the charge despite being a financial burden out of obligation.

(103)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Nov 07, 2016



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REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603



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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the Director

Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.



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RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

La demande de réexamen doit être présentée par écrit et est signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au titulaire de permis.

La demande de réexamen doit contenir ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le titulaire de permis souhaite que le directeur examine;
- c) l'adresse du titulaire de permis aux fins de signification.

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur
a/s Coordinateur des appels
Inspection de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11^e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



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En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Inspection de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this 7th day of October, 2016

**Signature of Inspector /
Signature de l'inspecteur :**

**Name of Inspector /
Nom de l'inspecteur :** DARLENE MURPHY

**Service Area Office /
Bureau régional de services :** Ottawa Service Area Office