



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 prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Aug 15, 16, 21, 22, 2012	2012_054133_0033	Complaint

Licensee/Titulaire de permis

THE OTTAWA JEWISH HOME FOR THE AGED
10 Nadolny Sachs Private, Ottawa-Carleton, ON, K2A-4G7

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

HILLEL LODGE
10 NADOLNY SACHS PRIVATE, OTTAWA, ON, K2A-4G7

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

JESSICA LAPENSEE (133)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with the Director of Care, the Director of Social Work, Programs & Support Services, an environmental services worker and personal support workers

During the course of the inspection, the inspector(s) reviewed email correspondence between a complainant and the Administrator, reviewed the home's written complaints procedure titled "Complaints - Response Guidelines" (implementation date 04/02/2012), reviewed components of the home's resident and family handbook, reviewed Ethics Committee meeting minutes February 21, 2012, reviewed Family Council meeting minutes dated March 13 and April 24, 2012, reviewed Resident Council meeting minutes dated March 27, 2012, reviewed that home's April and June 2012 newsletters, reviewed documentation related to weekly preventative maintenance of the front door security system, observed a demonstration of the process that is in place to allow access into the building when there is no receptionist present and observed areas in the home where there is a public television.

The following Inspection Protocols were used during this inspection:

Accommodation Services - Maintenance

Reporting and Complaints

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Legend WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	Legendé 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.) The following constitutes written notification of non-compliance under paragraph 1 of section 152 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. 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 LTCHA, 2007 S.O. 2007, c.8, s. 22. Licensee to forward complaints

Specifically failed to comply with the following subsections:

s. 22. (1) Every licensee of a long-term care home who receives a written complaint concerning the care of a resident or the operation of the long-term care home shall immediately forward it to the Director. 2007, c. 8, s. 22 (1).

Findings/Faits saillants :

1. The licensee has failed to comply with LTCHA, 2007, s.22 (1) in that a written complaint that was received concerning the operation of the home was not immediately forwarded to the Director of the Ministry of Health and Long Term Care (MOHLTC).

A written complaint was emailed to the home's Administrator on the evening of July 8th 2012. The email included the following statement "This is a formal complaint to be forwarded to the Ministry...". The Administrator acknowledged receipt of the written complaint via email in the afternoon of July 9th 2012 and indicated that a detailed response would be provided to the complainant the next day following his review of the matter. The Administrator did not forward this written complaint to the MOHLTC Service Area Office immediately, on July 9th 2012. The inspector was shown evidence that the Administrator attempted to forward this written complaint to the MOHLTC the following day, on July 10th 2012, however the incorrect email address was used.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 101. Dealing with complaints



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Specifically failed to comply with the following subsections:

s. 101. (1) Every licensee shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

1. The complaint shall be investigated and resolved where possible, and a response that complies with paragraph 3 provided within 10 business days of the receipt of the complaint, and where the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately.

2. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 3 shall be provided as soon as possible in the circumstances.

3. A response shall be made to the person who made the complaint, indicating,

i. what the licensee has done to resolve the complaint, or

ii. that the licensee believes the complaint to be unfounded and the reasons for the belief. O. Reg. 79/10, s. 101 (1).

Findings/Faits saillants :

1. The licensee has failed to comply with O. Reg 79/10, s. 101 (1)1 in that following the receipt of a written complaint, a response was provided to the complainant within 12 business days and not within 10 business days as is required.

A written complaint was emailed to the home's Administrator on the evening of July 8th 2012. The Administrator acknowledged receipt of the written complaint via email in the afternoon of July 9th 2012 and indicated that a detailed response would be provided to the complainant the next day following his review of the matter. The complainant then replied to the Administrator's initial email several hours later. The inspector was shown evidence that on July 10th 2012, the Administrator replied to the complainant's most recent email with a response to the complaint, however the email did not go through. The inspector was shown evidence that the Administrator then attempted to forward the response to the complainant three times on July 10th 2012, however the incorrect email address was used. On July 23rd 2012 the complainant sent an email to the Administrator indicating that a detailed response to the complaint had not yet been received. On July 25th 2012 the Administrator sent an email to the complainant that included a response to the complaint and the complainant acknowledged that it was received.

Issued on this 22nd day of August, 2012

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

Jessica Lépensee