

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

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

Long-Term Care Operations Division
Long-Term Care Inspections Branch

Division des opérations relatives aux
soins de longue durée
Inspection de soins de longue durée

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Feb 20, 2020	2020_607523_0008	024168-19	Complaint

Licensee/Titulaire de permis

Revera Long Term Care Inc.
5015 Spectrum Way, Suite 600 MISSISSAUGA ON L4W 0E4

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

Hillside Manor
Highway 8, 5066 Perth East Line 34, R.R. #5 STRATFORD ON N5A 6S6

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

ALI NASSER (523), CASSANDRA ALEKSIC (689)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): February 3, 4 and 5, 2020.

This inspection was conducted for Complaint Log #024168-19, related to allegations of resident's neglect and staffing shortages.

This inspection was conducted concurrently with inspection for Critical Incident Intake Log #001010-20 / CIS #1975-000002-20 related to a resident's fall.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Nutrition Services Manager, Staffing Agency Owner/Operator, Scheduling Clerk, four Personal Support Workers (PSW), PSW student, two Personal Services Assistant, Registered Nurse and a Resident.

The inspector(s) also toured the home, observed residents and care provided to them, reviewed clinical records, staffing schedules, staffing plans and employee files.

**The following Inspection Protocols were used during this inspection:
Continence Care and Bowel Management
Prevention of Abuse, Neglect and Retaliation
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)

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 O.Reg 79/10, s. 215. Police record check

Findings/Faits saillants :

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1. The licensee has failed to ensure that a criminal reference check, that was conducted within six months before a staff member was hired, was completed before a licensee hired a staff member to determine the person's suitability to be a staff member in a long-term care home and to protect residents from abuse and neglect.

The Long-Term Care Homes Act, 2007 s. 75 (1) states: Every licensee of a long-term care home shall ensure that screening measures are conducted in accordance with the regulations before hiring staff and accepting volunteers.

The Long-Term Care Homes Act, 2007 s. 75 (3) stated: For the purposes of subsection (1), a staff member who is agency staff, as that term is defined in subsection 74 (2), is considered to be hired when he or she first works at the home.

The Ministry of Long-Term Care received a complaint on a certain date related to staffing shortages.

In an interview the Administrator said that they have a contract with a staffing agency that would provide staff to fill up vacant shifts.

A review of the staffing schedule for a specific period of time revealed a specific number of shifts were filled by agency staff.

In an interview the staffing agency Owner/Operator said that all workers at the agency had police checks done prior to their hire at the agency and the agency request police checks every year from the employees. The staff may not have a police check within six months of their first shift at the specific home.

A record review was completed of specific employee personnel files. The date of hire and date of completion of police vulnerable sector criminal reference check was noted.

The record review showed a certain number of the employees did not have a criminal reference check that was conducted within six months before the staff's member first worked at the home.

The licensee has failed to ensure that the agency staff had a criminal reference check done within six months of the first day they worked at the home. [s. 215.]

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 a criminal reference check, that was conducted within six months before a staff member was hired, was completed before a licensee hired a staff member to determine the person's suitability to be a staff member in a long-term care home and to protect residents from abuse and neglect, to be implemented voluntarily.

Issued on this 27th day of February, 2020

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

Original report signed by the inspector.