



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

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

**Long-Term Care Homes Division
Long-Term Care Inspections Branch**
**Division des foyers de soins de
longue durée**
Inspection de soins de longue durée

Sudbury Service Area Office
159 Cedar Street Suite 403
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Bureau régional de services de
Sudbury
159 rue Cedar Bureau 403
SUDBURY ON P3E 6A5
Téléphone: (705) 564-3130
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Public Copy/Copie du public

Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Mar 22, 2018	2018_655679_0007	025613-17, 025614-17, 025626-17, 025629-17, 025635-17, 025640-17, 025643-17, 025644-17, 025646-17, 025653-17, 026155-17, 001301-18, 001306-18, 004063-18	Follow up

Licensee/Titulaire de permis

St. Joseph's Care Group
35 North Algoma Street P.O. Box 3251 THUNDER BAY ON P7B 5G7

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

Hogarth Riverview Manor
300 Lillie Street THUNDER BAY ON P7C 4Y7

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

MICHELLE BERARDI (679), JENNIFER BROWN (647), JENNIFER LAURICELLA (542),
LAUREN TENHUNEN (196), TIFFANY BOUCHER (543)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): March 12-15, 2018.

The following intakes were inspected upon during this Follow Up inspection:



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- Seven Follow up logs regarding Compliance Order's (CO) #001 to #007, issued during inspection #2017_509617_0017, regarding s. 6. (1) (a) for plan of care, s. 19. (1) for duty to protect residents from abuse, s. 9. (1) related to doors in the home, s. 36. related to transferring, s. 49. (2) related to falls, s. 58. regarding transferring and s. 76. (2) related to training.
- Two Follow up logs regarding CO's #001 and #002, issued during inspection #2017_509617_0018, regarding s. 6. (7), plan of care and s. 31. (3) nursing and personal support services.
- One Follow up log regarding CO #001, issued during inspection #2017_509617_0019, regarding s. 69. related to weight changes.
- One Follow up log regarding CO #001, issued during inspection #2017_509617_0020, regarding s. 35. prohibited devices.
- Two Follow up logs regarding CO's #001 and #002, issued during inspection #2017_509617_0023, regarding s. 8. (1) policies and s. 218. related to training.
- One Follow up log regarding CO #001, issued during inspection #2018_657681_0002, related to s. 6. (10) (b), plan of care.

A Critical Incident System (CIS) inspection #2018_655679_0005 and a Complaint inspection #2018_655679_0006 were conducted concurrently with this complaint inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Acting Director of Care (ADOC), Clinical Managers, Physiotherapist, Registered Nurses (RNs), Registered Practical Nurses (RPNs), Personal Support Workers (PSWs), Security Guards, family members and residents.

The Inspector(s) also conducted a daily tour of resident care areas, observed the provision of care and services to residents, observed staff to resident interactions, reviewed relevant health care records, home's internal investigation notes, staff education records, as well as reviewed numerous licensee policies, procedure and programs.



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The following Inspection Protocols were used during this inspection:

Continence Care and Bowel Management

Falls Prevention

Nutrition and Hydration

Personal Support Services

Responsive Behaviours

Safe and Secure Home

Sufficient Staffing

Training and Orientation

During the course of this inspection, Non-Compliances were not issued.

0 WN(s)

0 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
LTCHA, 2007 S.O. 2007, c.8 s. 19. (1)	CO #002	2017_509617_0017	543	
O.Reg 79/10 s. 218.	CO #002	2017_509617_0023	196	



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O.Reg 79/10 s. 31. (3)	CO #002	2017_509617_0018	196
LTCHA, 2007 S.O. 2007, c.8 s. 35.	CO #001	2017_509617_0020	647
O.Reg 79/10 s. 36.	CO #004	2017_509617_0017	542
O.Reg 79/10 s. 49. (2)	CO #005	2017_509617_0017	647
O.Reg 79/10 s. 58.	CO #006	2017_509617_0017	542
LTCHA, 2007 S.O. 2007, c.8 s. 6. (1)	CO #001	2017_509617_0017	679
LTCHA, 2007 S.O. 2007, c.8 s. 6. (10)	CO #001	2018_657681_0002	542
LTCHA, 2007 S.O. 2007, c.8 s. 6. (7)	CO #001	2017_509617_0018	647
O.Reg 79/10 s. 69.	CO #001	2017_509617_0019	196



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LTCHA, 2007 S.O. 2007, c.8 s. 76. (2)	CO #007	2017_509617_0017	196
O.Reg 79/10 s. 8. (1)	CO #001	2017_509617_0023	679
O.Reg 79/10 s. 9. (1)	CO #003	2017_509617_0017	679

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.



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Issued on this 22nd day of March, 2018

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

Original report signed by the inspector.