



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

**Ministère de la Santé et des  
Soins de longue durée**

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

**Rapport d'inspection sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**Health System Accountability and  
Performance Division  
Performance Improvement and  
Compliance Branch**

**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
performance et de la conformité**

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## Public Copy/Copie du public

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<b>Report Date(s) / Date(s) du apport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Oct 9, 2015	2015_303563_0040	020488-15	Complaint

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### Licensee/Titulaire de permis

SHARON FARMS & ENTERPRISES LIMITED  
1340 HURON STREET LONDON ON N5V 3R3

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

KENSINGTON VILLAGE  
1340 HURON STREET LONDON ON N5V 3R3

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

MELANIE NORTHEY (563)

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## 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): October 7 and 8, 2015**

**The following Critical Incident Inspections were conducted concurrently during this inspection:**

**Log # 011315-15 / 2729-000003-15: resident to resident abuse**

**Log # 018247-15 / 2729-000006-15: missing resident greater than 3 hours**

**The following Complaint Inspection was conducted concurrently during this inspection:**

**Log # 022090-15 / IL-39859-LO: resident neglect**

**During the course of the inspection, the inspector(s) spoke with the Administrator, the Resident Assessment Coordinator, two Registered Practical Nurses and one Personal Support Worker.**

**The inspector also made observations of residents and care provided. Relevant policies and procedures, as well as clinical records and plans of care for identified residents were reviewed.**

**The following Inspection Protocols were used during this inspection:  
Responsive Behaviours**

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

**1 WN(s)**

**0 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>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. 60. Powers of Family Council**

**Specifically failed to comply with the following:**

**s. 60. (2) If the Family Council has advised the licensee of concerns or recommendations under either paragraph 8 or 9 of subsection (1), the licensee shall, within 10 days of receiving the advice, respond to the Family Council in writing. 2007, c. 8, s. 60. (2).**

**Findings/Faits saillants :**



1. The licensee has failed to respond in writing within 10 days of receiving Family Council advice related to concerns or recommendations.

Record Review of Family Council Meeting Minutes dated June 29, 2015 revealed the Administrator who was usually present at all family council meetings was absent on this date.

Staff interview with the Administrator on October 8, 2015 confirmed that issues and concerns addressed at Family Council meetings were dealt with immediately at the meeting and the minutes reflect the response to those concerns.

The "concerns/issues/suggestions" presented at the Family Council meeting on June 29, 2015 included the following:

- a) what will happen if residents can not afford the new rates
- b) issues with labeling clothing
- c) concerns over staff consistency and high turnover of staff
- d) concerns related to more aggressive residents from Regional Mental Health being admitted to long term care
- e) dining room chairs are dirty with food and concerned how often they are wiped down
- f) asking who was responsible for contacting family members of appointments
- g) asking who was responsible for changing hearing aide batteries

Staff interview with the Administrator also confirmed issues were addressed at the next Family Council meeting dated July 27, 2015 and record review of the minutes confirmed this. The Administrator confirmed there was no response in writing within 10 days of receiving Family Council advice related to concerns or recommendations presented at the June 29, 2015 meeting. [s. 60. (2)]

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**Issued on this 9th day of October, 2015**

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

**Original report signed by the inspector.**