



**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**

**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**

**London Service Area Office
291 King Street, 4th Floor
LONDON, ON, N6B-1R8
Telephone: (519) 675-7680
Facsimile: (519) 675-7685**

**Bureau régional de services de
London
291, rue King, 4th étage
LONDON, ON, N6B-1R8
Téléphone: (519) 675-7680
Télécopieur: (519) 675-7685**

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
Dec 19, 2012	2012_182128_0009	L-001688-12	Complaint

Licensee/Titulaire de permis

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

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

**KENSINGTON VILLAGE
1340 HURON STREET, LONDON, ON, N5V-3R3**

**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs
RUTH HILDEBRAND (128)**

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): December 12, 2012

**During the course of the inspection, the inspector(s) spoke with the
Administrator, Director of Care, Assistant Director of Care, 1 Registered Nurse
and 1 Registered Practical Nurse.**

**During the course of the inspection, the inspector(s) reviewed the partial clinical
record for an identified resident, documentation related to complaints
procedures and training records related to Residents' Rights.**

**The following Inspection Protocols were used during this inspection:
Reporting and Complaints**



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

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	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.)	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.)
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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 O.Reg 79/10, s. 101. Dealing with complaints



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

Specifically failed to comply with the following:

- s. 101. (2) The licensee shall ensure that a documented record is kept in the home that includes,**
- (a) the nature of each verbal or written complaint; O. Reg. 79/10, s. 101 (2).
 - (b) the date the complaint was received; O. Reg. 79/10, s. 101 (2).
 - (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required; O. Reg. 79/10, s. 101 (2).
 - (d) the final resolution, if any; O. Reg. 79/10, s. 101 (2).
 - (e) every date on which any response was provided to the complainant and a description of the response; and O. Reg. 79/10, s. 101 (2).
 - (f) any response made in turn by the complainant. O. Reg. 79/10, s. 101 (2).**
-

Findings/Faits saillants :

1. Documented evidence is not available to support actions taken to resolve the identified complaint, including time frames and required follow-up action, nor every date on which any response was provided to the complainant, nor a description of the response. Additionally, there is no documentation of any response made by the complainant, nor if there was final resolution to the identified complaint.

The Administrator and Director of Care both acknowledged that the required documentation was not available. [s. 101. (2)]

Issued on this 19th day of December, 2012

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