

# Inspection Report Under the Fixing Long-Term Care Act, 2021

#### **Ministry of Long-Term Care**

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

#### **Central West Service Area Office**

609 Kumpf Drive, Suite 105 Waterloo, ON, N2V 1K8 Telephone: (888) 432-7901 central.west.sao@ontario.ca

# **Original Public Report**

Report Issue Date: November 7, 2022	
Inspection Number: 2022_1003_0001	
Inspection Type:	
Service Area Office Initiated Inspection (SAO II)	
Licensee: King Nursing Home Limited	
Long Term Care Home and City: King Nursing Home, Bolton	
Lead Inspector	Inspector Digital Signature
Katherine Adamski (#753)	
Additional Inspector(s)	
Nuzhat Uddin (#532)	
Diane Tone (#000686) was also present during the inspection.	

# **INSPECTION SUMMARY**

The Inspection occurred on the following date(s): October 17-21, 24, 2022

The following intake(s) were inspected during this SAO II:

• Intake: #00011278 - SAO II

The following Inspection Protocols were used during this inspection:

Infection Prevention and Control Food, Nutrition and Hydration Reporting and Complaints Medication Management Falls Prevention and Management Skin and Wound Prevention and Management Residents' and Family Councils



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# **INSPECTION RESULTS**

# WRITTEN NOTIFICATION: REPORTING CERTAIN MATTERS TO THE DIRECTOR

#### NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 28 (1) 2.

The licensee failed to ensure that a person who had reasonable grounds to suspect that any of the following had occurred or may have occurred, immediately reported the suspicion and the information upon which it was based to the Director: abuse of a resident by anyone that resulted in harm or risk of harm.

#### **Rational and Summary**

Three incidents of suspected abuse had been investigated by the home.

The Assistant Director Of Care (ADOC) acknowledged that the incidents of suspected abuse had been investigated by the home, however, they had not been reported, as required by the Fixing Long-Term Care Act (FLTCA), 2021.

As a result of not immediately reporting the incidents to the Director, the Director could not immediately respond to the incidents, if required.

**Sources:** Internal investigation notes, Ministry of Long-Term Care Reporting Portal January 1 to October 20, 2022, Critical Incident (CI) system reports dated October 25, 2022, interviews with the ADOC.

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## WRITTEN NOTIFICATION: REPORTING AND COMPLAINTS

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1. Non-compliance with: O.Reg. 246/22, s. 108 (2)(c)

The licensee has failed to ensure that a documented record was kept in the home that included the type of action taken to resolve complaints received by the home, including the date of the action, time frames for actions to be taken and any follow-up action required.



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#### **Rational and Summary**

Multiple Complaint Record Forms showed varying degrees of completeness in relation to the type of action taken to resolve the complaints.

**Sources:** Complaint Record Forms, Client Complaint Registry Form 2022, interview with the Administrator.

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# WRITTEN NOTIFICATION: REPORTING AND COMPLAINTS

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1. Non-compliance with: O.Reg. 246/22, s. 108 (2)(d)

The licensee has failed to ensure that a documented record was kept in the home that included the final resolution, if any, of complaints received by the home.

#### **Rational and Summary**

Multiple Complaint Record Forms did not document the final resolution of complaints received by the home.

The Client Complaint Registry Form 2022 did not document the final resolution of 13 complaints received by the home.

**Sources:** Complaint Record Forms, Client Complaint Registry Form 2022, interview with the Administrator.

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## WRITTEN NOTIFICATION: REPORTING AND COMPLAINTS

### NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O.Reg. 246/22, s. 108 (2)(e)

The licensee has failed to ensure a documented record was kept in the home that included every date on which any response was provided to the complainant and a description of the response.

#### **Rational and Summary**



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Multiple Complaint Record Forms did not include documentation of every date on which any response was provided to the complainant and a description of the response.

**Sources:** Complaint Record Forms, Client Complaint Registry Form 2022, interview with the Administrator.

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## WRITTEN NOTIFICATION: REPORTING AND COMPLAINTS

NC #005 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1. Non-compliance with: O.Reg. 246/22, s. 108 (2)(f)

The licensee has failed to ensure that a documented record was kept in the home that included any response made in turn by the complainant.

#### **Rational and Summary**

Multiple Complaint Record Forms did not document responses made by complainants about their complaint.

The Client Complaint Registry Form 2022 did not document responses made related to 13 complaints.

**Sources:** Complaint Record Forms, Client Complaint Registry Form 2022, interview with the Administrator.

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