

Ministère de la Santé et des Soins de longue durée

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

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

Long-Term Care Homes Division **Long-Term Care Inspections Branch**

Division des foyers de soins de longue durée Inspection de soins de longue durée

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Report Date(s) / Date(s) du Rapport No de l'inspection

Nov 1, 2019

2019 598570 0022

Inspection No /

Loa #/ No de registre

009369-19, 013618-19, 016515-19

Type of Inspection / **Genre d'inspection**

Complaint

Licensee/Titulaire de permis

Regional Municipality of Durham 605 Rossland Road East WHITBY ON L1N 6A3

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

Lakeview Manor 133 Main Street P.O. Box 514 Beaverton ON LOK 1A0

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs SAMI JAROUR (570)

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): September 30, October 1-3, 7, 8, 2019

Complaints Logs #009369-19, #013618-19 and #016515-19 related to withholding approval for admission had been inspected.

During the course of the inspection, the inspector(s) spoke with the CE LHIN Placement Coordinator, Manager of Environmental Services (MES), Infection Control Practitioner (ICP), the Director of Care (DOC), Infection Control Practitioner, Residents Care Coordinator (RCC) and Registered Nurse (RN) in charge of admission and placement services at the LTC home.

During the course of the inspection, the inspector reviewed the Central East Local Health Integration Network (CE LHIN)'s referrals for long term placement and the refusal letters for admission.

The following Inspection Protocols were used during this inspection: Admission and Discharge

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)



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NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Légende
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 LTCHA, 2007 S.O. 2007, c.8, s. 44. Authorization for admission to a home



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Specifically failed to comply with the following:

- s. 44. (7) The appropriate placement co-ordinator shall give the licensee of each selected home copies of the assessments and information that were required to have been taken into account, under subsection 43 (6), and the licensee shall review the assessments and information and shall approve the applicant's admission to the home unless,
- (a) the home lacks the physical facilities necessary to meet the applicant's care requirements; 2007, c. 8, s. 44. (7).
- (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or 2007, c. 8, s. 44. (7).
- (c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44. (7).
- s. 44. (9) If the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out,
- (a) the ground or grounds on which the licensee is withholding approval; 2007, c. 8, s. 44. (9).
- (b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; 2007, c. 8, s. 44. (9).
- (c) an explanation of how the supporting facts justify the decision to withhold approval; and 2007, c. 8, s. 44. (9).
- (d) contact information for the Director. 2007, c. 8, s. 44. (9).

Findings/Faits saillants:

1. The licensee has failed to comply with s. 44 (7) of the Long-Term Care Homes Act (LTCHA) whereby the licensee refused the application of applicant #005 for reasons other than provided for in the LTCHA.

According to LTCHA, 2007, s. 44 (7), The appropriate placement co-ordinator shall give the licensee of each selected home copies of the assessments and information that were required to have been taken into account, under subsection 43 (6), and the licensee shall review the assessments and information and shall approve the applicant's admission to the home unless, (a) the home lacks the physical facilities necessary to meet the applicant's care requirements; (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or (c) circumstances exist which are provided for in the regulations as being a ground for withholding approval.



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Related to Log # 009369-19

The Ministry of Long-Term Care (MLTC) received a complaint on an identified date, related to the home withholding approval for admission of applicant #005.

An interview with the Central East Local Health Integration Network (LHIN) Placement Co-ordinator indicated applicant #005 had an identified medical condition and remained awaiting placement. The applicant was rejected twice by Lakeview Manor.

A review of applicant #005's Health Assessment - LHIN document on an identified date, indicated the applicant previously had a specified medical condition, but currently assessed as not having the specified condition.

A review of the applicant's refusal letter for admission on an identified date, indicated the applicant was refused admission because the home lacked the nursing expertise and physical facilities necessary to meet the applicant's care requirements. The explanation provided by the licensee in the refusal letter indicated that the home was not equipped or prepared to provide the assistance and the care that the applicant required. Staff have yet to be educated regarding providing services to a resident that had an identified medical condition. The facility was not equipped to meet the care requirements for the applicant.

A review of the home's second refusal letter addressed to applicant #005 on an identified date, stated that the home was withholding approval of the applicant's admission because the home lacked the physical facilities necessary to meet the applicant's care requirements.

A interview with RN #106, Infection Control Practitioner at the LTC home, indicated the home had an infection control and prevention program. The RN further indicated that staff at the home are educated regrading infection prevention and control practices in the home and participate in the implementation of the infection prevention and control program.

An interview with, Director of Care (DOC) indicated that the home does not have environmental measures in place to meet the applicant's care requirements.

The licensee has failed to comply with s. 44 (7) of the LTCHA whereby the licensee



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refused the application of applicant #005 for reasons other than provided for in the LTCHA. [s. 44. (7)]

2. Related to Logs # 013618-19 and # 016515-19:

The Ministry of Long-Term Care (MLTC) received a complaint on an identified date, indicating applicant #006 had been refused admission to the Long-Term Care Home.

A second complaint was received by the MLTC on an identified date. The complainant indicated the LTC home continuously declined placement for applicant #006.

A review of the applicant's refusal letter for admission on identified date, from the licensee indicated the applicant was refused admission because the home lacked the nursing expertise and physical facilities necessary to meet the applicant's care requirements. The explanation provided by the licensee in the refusal letter indicated that the applicant had an identified responsive behaviour that may evoke co-residents.

A review of the Placement Services Behavioural Assessment Tool on identified date, indicated an identified responsive behaviour was predictable and due to triggers. The Behavioural Assessment Tool identified the triggers, interventions and the frequency for the identified behaviour.

During an interview with RN #109, in charge of admission and placement services at the LTC home, indicated that applicant #006 was declined following an onsite visit by the nurse practitioner (NP). The NP noted during the onsite visit that the applicant was constantly exhibiting an identified behaviour. The RN indicated that there was a concern for the applicant's safety as well as other residents' safety as the applicant's behaviour could be a trigger for other resident's responsive behaviours based on similar situations in the past with residents who exhibited similar responsive behaviours. The RN confirmed that the LTC home had private room accommodations, but they are in same hallway with other residents. The RN indicated that the home currently had residents with responsive behaviours. Staff at the home received Gentle Persuasion Approach (GPA) training; the home had one BSO PSW staff and that residents with responsive behaviours can be referred for outside support.

During an interview, nurse practitioner (NP) #110 indicated the home had admitted residents with responsive behaviours and those behaviours were managed with a combination of pharmacologic and non pharmacologic interventions that address



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responsive behaviours. The NP indicated that some of the staff at the home were trained in GPA and some of the staff were trained in PIECES. The NP indicated that they did an onsite visit and noted the applicant post recent hospitalization was exhibiting a responsive behaviour for a specified period of time. The NP indicated that the LTC home could not provide accommodation that would be necessary to minimize the responsive behaviour being felt by other residents.

During an interview, the Director of Care (DOC) indicated that the LTC Home had a responsive behaviours program and that staff at the LTC home are trained to deal with responsive behaviours, however, the LTC home had many residents with responsive behaviours more than they could manage. The DOC indicated regrading applicant #006 that the applicant had an identified responsive behaviour and that some residents could not tolerate that.

The licensee has failed to comply with s. 44 (7) of the LTCHA whereby the licensee refused the application of applicant #006 for reasons other than provided for in the LTCHA. [s. 44. (7)]

3. The licensee has failed to ensure that when withholding approval for admission, the licensee shall give a written notice to the applicant, setting out the ground or grounds on which the licensee is withholding approval; a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; an explanation of how the supporting facts justify the decision to withhold approval.

According to LTCHA, s. 44 (9), If the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out,

- (a) the ground or grounds on which the licensee is withholding approval;
- (b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care;
- (c) an explanation of how the supporting facts justify the decision to withhold approval; and
- (d) contact information for the Director.

Related to Logs # 013618-19 and # 016515-19:

The Ministry of Long-Term Care (MLTC) received a complaint on an identified date, indicating applicant #006 had been refused admission to the Long-Term Care Home.



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A second complaint was received by the MLTC on an identified date. The complainant indicated the LTC home continuously declined placement for applicant #006.

A review of the applicant's refusal letter for admission on identified date, indicated the applicant was refused admission because the home lacked the nursing expertise and physical facilities necessary to meet the applicant's care requirements. The explanation provided by the licensee in the refusal letter indicated that the applicant's had identified responsive behaviours that may evoke co-residents. The letter did not include a detailed explanation related to how the home lacked the nursing expertise that would be required for the care of this applicant, and did not include details as to how the home lacked physical facility that would be required for the care of this applicant. The letter included descriptions of the resident's behaviours and notes from previous rejection letters.

During separate interviews, the DOC and RN #109 both acknowledged the letter did not include detailed explanation specific to the home's lack of nursing expertise and lack of physical facility that would be required for the care of this applicant. [s. 44. (9)]

4. Related to Logs # 013618-19 and # 016515-19:

Review of the applicant #006`s refusal letter for admission on an identified date from the licensee indicated the applicant was refused admission because the home lacked the nursing expertise and physical facilities necessary to meet the applicant's care requirements. The refusal letter for admission did not include the contact information for the Director. [s. 44. (9) (d)]

5. Related to Log # 009369-19

A review of the applicant #005's refusal letter for admission on an identified date, indicated the applicant was refused admission because the home lacked the nursing expertise and physical facilities necessary to meet the applicant's care requirements.

A review of the home's second refusal letter addressed to applicant #005 on an identified date, stated the home withheld approval of the applicant's admission because the home lacked the physical facilities necessary to meet the applicant's care requirements.

Both refusal letters for admission did not include the contact information for the Director. [s. 44. (9) (d)]



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Issued on this 6th day of November, 2019

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

Original report signed by the inspector.