



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
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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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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Mar 6, 2014	2014_317703_0007	O-000067- 14	Other

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, L0K-1A0

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

ANDREW RENNER (703)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct an Other inspection.

This inspection was conducted on the following date(s): February 19, 2014

The inspector conducted further telephone conversations with staff on March 4, 2014.

During the course of the inspection, the inspector(s) spoke with Acting Administrator, Senior Accounting Clerk, Administrative Assistant, residents and substitute decision makers for residents.

During the course of the inspection, the inspector(s) examined trust account ledger, trust account transactions, trust account bank statement, trust account bank reconciliation, trust account policy and procedures, resident files, trust account audit report, legal certification of regulated documents and conducted interviews with staff, residents and substitute decision makers for residents.

**The following Inspection Protocols were used during this inspection:
Resident Charges
Trust Accounts**

Findings of Non-Compliance were found during this inspection.



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 O.Reg 79/10, s. 241. Trust accounts

Specifically failed to comply with the following:

s. 241. (5) Every licensee shall establish a written policy and procedures for the management of resident trust accounts and the petty cash trust money, which must include,

(a) a system to record the written authorizations required under subsection (8); and O. Reg. 79/10, s. 241 (5).

(b) the hours when the resident, or the person acting on behalf of the resident, can make deposits to or withdrawals from the resident's funds in a trust account and make withdrawals from the petty cash trust money. O. Reg. 79/10, s. 241 (5).



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Findings/Faits saillants :

1. The resident trust banking hours are not included in the Trust Account Policy and Procedures but information regarding the resident trust account banking hours is provided to the residents and their substitute decision makers in the admission package. [s. 241. (5)]

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 261. Statements Specifically failed to comply with the following:

s. 261. (1) Every licensee of a long-term care home shall, within 30 days after the end of each month, provide each resident or the resident's attorney under the Powers of Attorney Act, or person exercising a continuing power of attorney for property or a guardian of property under Part I of the Substitute Decisions Act, 1992, with an itemized statement of the charges made to the resident within the month. O. Reg. 79/10, s. 261 (1).

Findings/Faits saillants :

1. A record review, interview with residents and substitute decision makers for residents and interview with the staff confirmed that unfunded services paid by the Home and charged directly to residents are included in the quarterly trust account statements but not included in the itemized monthly statement provided to each resident or the resident's power of attorney. [s. 261. (1)]

Issued on this 7th day of March, 2014

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

Andrew Kemmer