

- Resident Care and Support Services;
- Skin and Wound Prevention and Management;
- Residents' Rights and Choices.

INSPECTION RESULTS

NON-COMPLIANCE REMEDIED

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154(2) and requires no further action.

NC#001 remedied pursuant to FLTCA, 2021, s. 154(2)

Findings of Non-Compliance were found during this inspection and were remedied prior to its conclusion. The inspector was satisfied that the non-compliance met the intent of section 154(2) and requires no further action.

FLTCA, 2021 s. 3(1) 19 (iv)

The licensee has failed to ensure that every resident has the right to have their personal health information within the meaning of the Personal Health Information Protection Act, 2004 kept confidential in accordance with that Act.

During observations on a home area, the Meeting Room's door which contained residents' hard copy charts of their personal health information was open and left unattended for 14 minutes. Residents were around the area, visitors on the unit and staff passing by.

A Personal Support Worker (PSW) stated that the door was supposed to be closed and locked when not in use because it contained the residents' personal health information charts.

The Assistant Manager of Residents Care (AMRC) stated that these doors should be locked when not in use and that they would educate staff right away to make sure they close and lock that door.

This non-compliance was remedied immediately when the home locked the doors to ensure residents personal health information was protected and educating staff to protect residents' personal health information.

Sources: Observations of the Juniper home area, interviews with a PSW and the AMRC.

Date Remedy Implemented: February 24, 2022 [Inspector #615]