

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

## Ministry of Health and Long-Term Care

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

Hamilton Service Area Office 119 King Street West, 11th Floor HAMILTON, ON, L8P-4Y7 Telephone: (905) 546-8294 Facsimile: (905) 546-8255 Ministère de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jun 29, Jul 25, 2011	2011_064167_0008	Complaint
Licensee/Titulaire de permis		
THE REGIONAL MUNICIPALITY OF NI 2201 ST. DAVID'S ROAD, THOROLD, Cong-Term Care Home/Foyer de soin	ON, L2V-4T7	
LINHAVEN 403 Ontario Street, St. Catharines, ON,	L2N-1L5	
Name of Inspector(s)/Nom de l'inspec	cteur ou des inspecteurs	
MARILYN TONE (167)		
	Inspection Summary/Résumé de l'inspe	ection

The purpose of this inspection was to conduct a Complaint inspection.

During the course of the inspection, the inspector(s) spoke with The Administrator and the resident involved in this complaint.

During the course of the inspection, the inspector(s) Conducted a review of the health records for the identified resident and any documentation related to correspondence between the complainant and the home.

The following Inspection Protocols were used in part or in whole during this inspection: Personal Support Services

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RI	ESPECT DES EXIGENCES
VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order	Définitions  WN – Avis écrit  VPC – Plan de redressement volontaire  DR – Aiguillage au directeur  CO – Ordre de conformité  WAO – Ordres : travaux et activités



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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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 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.

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 Specifically failed to comply with the following subsections:

- s. 101. (1) Every licensee shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:
- 1. The complaint shall be investigated and resolved where possible, and a response that complies with paragraph 3 provided within 10 business days of the receipt of the complaint, and where the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately.
- 2. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 3 shall be provided as soon as possible in the circumstances.
- 3. A response shall be made to the person who made the complaint, indicating,
- i. what the licensee has done to resolve the complaint, or
- ii. that the licensee believes the complaint to be unfounded and the reasons for the belief. O. Reg. 79/10, s. 101 (1).

## Findings/Faits sayants:

1. The licensee did not ensure that a written complaint related to the care of an identified resident was responded to within 10 business days.

A letter of complaint was given to a registered staff member at the home with a request that the physician and the administrator receive a copy. The letter expressed concerns related to care issues. No response was provided by the home to the complainant related to this letter.

Issued on this 26th day of July, 2011

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