



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

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

**Ministry of Health and Long-Term Care**  
Health System Accountability and Performance Division  
Performance Improvement and Compliance Branch

London Service Area Office  
291 King Street, 4th Floor  
London ON N6B 1R8

Bureau régional de services de London  
291, rue King, 4<sup>ème</sup> étage  
London ON N6B 1R8

**Ministère de la Santé et des Soins de  
longue durée**

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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

Licensee Copy/Copie du Titulaire  Public Copy/Copie Public

<b>Date of inspection/Date de l'inspection</b> March 8, 2011	<b>Inspection No/ d'inspection</b> 2011_105_8537_08Mar093526	<b>Type of Inspection/Genre d'inspection</b> L-00306 Critical Incident
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**Licensee/Titulaire**  
St Joseph's Health Services Association of London Inc. 268 Grosvenor St. PO Box 5777 London ON N6A 4V2

**Long-Term Care Home/Foyer de soins de longue durée**  
Marian Villa 200 College Ave., PO Box 5777 London ON N6A 1Y1

**Name of Inspector/Nom de l'inspecteur**  
June Osborn #105

**Inspection Summary/Sommaire d'inspection**

The purpose of this inspection was to conduct a critical incident inspection related to resident care.

During the course of the inspection, the inspector spoke with the resident care co-ordinator, the education co-ordinator, and 2 physio assistants.

During the course of the inspection, the inspector observed the actual lift, met the resident, reviewed the home's investigation, reviewed the lift policies, reviewed education pertinent to lifts, reviewed the latest inspection report of the lift, reviewed the Hill-Rom Inspection report.

Findings of Non-Compliance were found during this inspection. The following action was taken:

1WN  
1 CO: CO # 001



**NON-COMPLIANCE / (Non-respectés)**

**Definitions/Définitions**

WN – Written Notifications/Avis écrit  
VPC – Voluntary Plan of Correction/Plan de redressement volontaire  
DR – Director Referral/Régisseur envoyé  
CO – Compliance Order/Ordres de conformité  
WAO – Work and Activity Order/Ordres: travaux et activités

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

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 suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

**WN #1:** The Licensee has failed to comply with O. Reg. 79/10, s. 23.  
Every licensee of a long-term care home shall ensure that staff, use all equipment, supplies, devices, assistive aids and positioning aids in the home in accordance with manufacturers' instructions.

**Findings:**

**1. The Liko lift used to lift the resident was used with a "Waverly Glen " sling not a Liko sling as recommended, and the resident fell out of the sling when the sling became detached from the lift.**

**Inspector ID #:** 105

**Additional Required Actions:**

**CO # - 001** will be served on the licensee. Refer to the "Order of the Inspector" form.

Signature of Licensee or Representative of Licensee  
Signature du Titulaire du représentant désigné

Signature of Health System Accountability and Performance Division  
representative/Signature du (de la) représentant(e) de la Division de la  
responsabilisation et de la performance du système de santé.

Title:

Date:

Date of Report:  
March 10, 2011



## Order of the Inspector

Pursuant to section 153 and/or section 154 of the  
*Long-Term Care Homes Act, 2007*, S.O. 2007, c.8

	<input type="checkbox"/> Licensee Copy/Copie du Titulaire	<input checked="" type="checkbox"/> Public Copy/Copie Public
Name of Inspector:	June Osborn	Inspector ID # 105
Log #:	L-00306	
Inspection Report #:	2011_105_8537_08Mar093526	
Type of Inspection:	Critical Incident	
Date of Inspection:	March 08, 2011	
Licensee:	St. Joseph's Health Services Association of London Inc. 268 PO Box 5777 London ON N6A 4V2	
LTC Home:	Marian Villa 200 College Ave., PO Box 5777 London ON N6A 1Y1	
Name of Administrator:	Ann Wouters	

To St. Joseph's Health Services Association of London Inc., you are hereby required to comply with the following order by the date set out below:

Order #:	001	Order Type:	Compliance Order, Section 153 (1)(b)
<p><b>Pursuant to: O. Reg. 79/10, s. 23. Every licensee shall ensure that staff use all equipment, supplies, devices, assistive aids and positioning aids in the home in accordance with manufacturers' instructions.</b></p>			
<p><b>Order:</b>          The licensee shall prepare, submit, and implement a plan for achieving compliance with the use of lifting devices for residents, as recommended by the manufacturer.</p>			
<p><b>Grounds:</b>          1. A resident was lifted by a Liko lift using a Waverly Glen sling which became detached from the lifting bar causing the resident to fall onto the floor.</p>			
This order must be complied with by:		March 21, 2011	



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Health System Accountability and Performance Division  
Performance Improvement and Compliance Branch

**Ministère de la Santé et des Soins de longue durée**  
Division de la responsabilisation et de la performance du système de santé  
Direction de l'amélioration de la performance et de la conformité

## **REVIEW/APEAL INFORMATION**

### **TAKE NOTICE:**

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this(these) Order(s) in accordance with section 163 of the *Long-Term Care Homes Act, 2007*.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for service for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

**Director**  
c/o Appeals Clerk  
Performance Improvement and Compliance Branch  
Ministry of Health and Long-Term Care  
55 St. Clair Ave. West  
Suite 800, 8<sup>th</sup> floor  
Toronto, ON M4V 2Y2  
Fax: 416-327-7603

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the *Long-Term Care Homes Act, 2007*. The HSARB is an independent group of members not connected with the Ministry. They are appointed by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, with 28 days of being served with the notice of the Director's decision, mail or deliver a written notice of appeal to both:

**Health Services Appeal and Review Board and the  
Attention Registrar**  
151 Bloor Street West  
9th Floor  
Toronto, ON  
M5S 2T5

**Director**  
c/o Appeals Clerk  
Performance Improvement and Compliance Branch  
55 St. Claire Avenue, West  
Suite 800, 8<sup>th</sup> Floor  
Toronto, ON M4V 2Y2

Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website [www.hsarb.on.ca](http://www.hsarb.on.ca).



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Direction de l'amélioration de la performance et de la conformité

Issued on this 10th day of March, 2011.	
Signature of Inspector:	<i>June Osborn</i>
Name of Inspector:	June Osborn
Service Area Office:	London Service Area Office