

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

**Rapport d'inspection en vertu de  
la Loi de 2007 sur les foyers de  
soins de longue durée**

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

**Division des opérations relatives aux  
soins de longue durée  
Inspection de soins de longue durée**

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**Public Copy/Copie du rapport public**

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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Jun 24, 2020	2020_577611_0005	001656-20	Complaint

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**Licensee/Titulaire de permis**

Niagara Health System  
63 Third Street Welland Hospital Site WELLAND ON L3B 4W6

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

Niagara Health System, Welland Hospital Site, Extended Care Unit  
65 Third Street WELLAND ON L3B 4W6

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

KELLY CHUCKRY (611)

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**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): February 21 and 24, 2020.**

**During the course of the inspection, the inspector(s) reviewed relevant policies and procedures, and applicant refusal for admission letters.**

**During the course of the inspection, the inspector(s) spoke with the Director of Care, and the Local Health Integration Network (LHIN) Placement Coordinator.**

**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)**
- 1 VPC(s)**
- 0 CO(s)**
- 0 DR(s)**
- 0 WAO(s)**

<b>NON-COMPLIANCE / NON - RESPECT DES EXIGENCES</b>	
<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>Légende</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>

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**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 44.  
Authorization for admission to a home**

**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 failed to ensure that they complied with the Act when they refused five (5) applicant admissions to the home based on reasons that were not permitted within the legislation.

Applicant #002, #003, #004, #005, and #006 all received letters refusing admission to the home based on reasons that were not permitted within the legislation.

The letters for each applicant were similar in nature and indicated the home rejected each applicant for admission. The letters further indicated that the home was a smoke free environment/property and must adhere to organizational policy as well as the Niagara Region Public Health Bylaw.

During discussions with the Director of Care, (DOC), it was indicated that they had residents residing in the home who currently smoke, and that they were managed individually. It was confirmed during review of the documentation and during discussion with the DOC that they refused the applicant's admission to the home based on these identified reasons that were not permitted within the legislation. [s. 44. (7) (a)]

2. The licensee failed to ensure that they complied with the Act when they refused five (5) applicant admissions to the home and did not include the contact information for the Director in their written notices. 2007, c. 8, s. 44. (9).

Applicant #002, #003, #004, #005, and #006 all received letters refusing admission to the home based on reasons that were not permitted within the legislation.

The letters for each applicant were similar in nature and indicated the home rejected each applicant for admission.

In a telephone discussion with the DOC it was confirmed that all five (5) letters did not include the contact information for the Director. [s. 44. (9) (d)]

***Additional Required Actions:***

***VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that they comply with the Act, for refusing admissions to the home, and ensure the contact information for the Director is included in all written notices for refusal, to be implemented voluntarily.***

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**Issued on this 29th day of June, 2020**

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

**Original report signed by the inspector.**