Ontario

Ministry of Health and Long-Term Care

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

Ministère de la Santé et des Soins de longue durée

Rapport d'inspection sous la Loi de 2007 sur les foyers de soins de longue durée

Long-Term Care Homes Division
Long-Term Care Inspections Branch

Division des foyers de soins de longue durée
Inspection de soins de longue durée

London Service Area Office
130 Dufferin Avenue 4th floor
LONDON ON N6A 5R2
Telephone: (519) 873-1200
Facsimile: (519) 873-1300

Bureau régional de services de London
130 avenue Dufferin 4ème étage
LONDON ON N6A 5R2
Téléphone: (519) 873-1200
Télécopieur: (519) 873-1300

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Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Feb 22, 2018	2017_678680_0015	004296-17	Critical Incident System

Licensee/Titulaire de permis

The Corporation of the County of Lambton
789 Broadway Street WYOMING ON N0N 1T0

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

North Lambton Lodge
39 Morris Street, R.R. #6 FOREST ON N0N 1J0

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

TRACY RICHARDSON (680)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): September 18, 19, 20, 21 and 22, 2017.

The following intake was inspected:
Log #004296-17, Critical Incident System (CIS) #M559-000003-17, related to misappropriation of funding.

During the course of the inspection, the inspector(s) spoke with the Administrator, two Directors of Nursing and Personal Care, the Quality Improvement Coordinator, the General Manager, the Administrative Assistant, the Nutrition and Environmental Supervisor, the confidential secretary, the Comfort Trust Clerk, the Ontario Provincial Police, a Forensic Auditor, the Financial General Manager, Cooks, Dietary Aides, Registered Practical Nurses, Registered Nurses, Personal Support Workers, Health Care Assistants, and residents.

The following Inspection Protocols were used during this inspection:
Critical Incident Response

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)**

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	Legendé WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
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 LTCHA, 2007 S.O. 2007, c.8, s. 22. Licensee to forward complaints

Specifically failed to comply with the following:

s. 22. (1) Every licensee of a long-term care home who receives a written complaint concerning the care of a resident or the operation of the long-term care home shall immediately forward it to the Director. 2007, c. 8, s. 22 (1).

Findings/Faits saillants :

1. The licensee has failed to ensure that when a written complaint was received concerning the operation of the long-term care home they immediately forwarded it to the Director.

Critical Incident System report (CIS) was submitted to the Ministry of Health and Long-Term Care (MOHLTC), regarding alleged misappropriation of funding provided by a previous employee.

The CIS report stated that during an investigation into another employee matter it was discovered that an employee had been selling bulk food and allegedly taking the funds for personal use. The CIS date was listed as occurring in a specified month and year. In the report the Ontario Provincial Police (OPP) had been notified the following month. The CIS report stated that an outside auditor had been hired.

In an email addressed to the General Manager (GM) and the Human Resource Manager, it stated that the an employee of the long-term care home was alleged to be taking money for personal use and having cheques made out to themselves.

The Investigative Report showed that the investigation was completed in a specified month and year, related to a personnel issue. In the report it stated that an investigation should be completed.

In an interview the GM stated that the investigation into theft was completed in a specified month and year, and provided to the human resources manager a couple days later. The GM stated that when they looked at the report it appeared the manager had been taking money for a specific program ran by the home. The GM stated that the the police were notified. The GM acknowledged that the report was not forwarded to the Director immediately.

The licensee has failed to ensure that when a written complaint was received concerning the operation of the long-term care home they immediately forwarded it to the Director. [s. 22. (1)]

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 when a written complaint is received concerning the care of a resident or the operation of the long-term care home it shall be immediately forward it to the Director,, to be implemented voluntarily.

Issued on this 22nd day of February, 2018

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

Original report signed by the inspector.