



**Ministry of Health and
Long-Term Care**

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

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

**Rapport d'inspection prévue
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**

Central West Service Area Office
1st Floor, 609 Kumpf Drive
WATERLOO ON N2V 1K8
Telephone: (888) 432-7901
Facsimile: (519) 885-2015

Bureau régional de services de Centre
Ouest
1e étage 609 rue Kumpf
WATERLOO ON N2V 1K8
Téléphone: (888) 432-7901
Télécopieur: (519) 885-2015

Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Jun 13, 2019	2019_508137_0017	033072-18	Follow up

Licensee/Titulaire de permis

CVH (No. 2) LP
766 Hespeler Road, Suite 301 c/o Southbridge Care Homes CAMBRIDGE ON N3H 5L8

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

Parkview Manor Health Care Centre
98 - 3rd Street South East P.O. Box 298 CHESLEY ON N0G 1L0

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

MARIAN MACDONALD (137)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): May 9, 2019

A Critical Incident Inspection (CIS) 1053-000004-18 related to falls prevention was completed concurrently during this Follow Up inspection.

During the course of the inspection, the inspector(s) spoke with the Executive Director and Registered Nurses.

The Inspector also observed the staffing complement in the home and reviewed registered staff schedules and recruitment strategies.

**The following Inspection Protocols were used during this inspection:
Sufficient Staffing**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

0 VPC(s)

1 CO(s)

0 DR(s)

0 WAO(s)



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Légende
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	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).	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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. 8. Nursing and personal support services

Specifically failed to comply with the following:

s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

Findings/Faits saillants :

1. The licensee has failed to comply with compliance order #001 from inspection #2018_735659_0020 that was served on November 28, 2018, with a compliance due date of March 29, 2019, to ensure that there was at least one registered nurse who was an employee of the licensee and member of the regular nursing staff on duty and present at all times unless there was an allowable exception to this requirement.

A review of the home's registered staff schedules, from March 30 to May 9, 2019, showed that 57 of 124 (45.9 per cent) of the Registered Nurse (RN) shifts were covered by a Registered Practical Nurse (RPN). They were evening and night shifts.

A review of the home's recruitment efforts showed ongoing advertisement for RNs on various websites, newspaper and job fairs. A job fair was held on May 9, 2019 at a local college.

Executive Director (ED) #102 stated that they currently had one full time vacancy for a RN and acknowledged that they used RPNs, as needed, to cover RN shifts.

The licensee had failed to ensure that there was at least one registered nurse who was an employee of the licensee and member of the regular nursing staff on duty and present at all times unless there was an allowable exception to this requirement. [s. 8. (3)]

Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".



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Issued on this 13th day of June, 2019

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

Original report signed by the inspector.



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Pursuant to section 153 and/or
section 154 of the *Long-Term
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O. 2007, chap. 8

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Public Copy/Copie du public

Name of Inspector (ID #) /

Nom de l'inspecteur (No) : MARIAN MACDONALD (137)

Inspection No. /

No de l'inspection : 2019_508137_0017

Log No. /

No de registre : 033072-18

Type of Inspection /

Genre d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : Jun 13, 2019

Licensee /

Titulaire de permis : CVH (No. 2) LP
766 Hespeler Road, Suite 301, c/o Southbridge Care
Homes, CAMBRIDGE, ON, N3H-5L8

LTC Home /

Foyer de SLD : Parkview Manor Health Care Centre
98 - 3rd Street South East, P.O. Box 298, CHESLEY,
ON, N0G-1L0

Name of Administrator /

**Nom de l'administratrice
ou de l'administrateur :** Jake Presseault



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O. 2007, chap. 8

To CVH (No. 2) LP, you are hereby required to comply with the following order(s) by the date(s) set out below:



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section 154 of the *Long-Term
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O. 2007, chap. 8

Order # /

Ordre no : 001

Order Type /

Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Linked to Existing Order / 2018_735659_0020, CO #001;
Lien vers ordre existant:

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

Order / Ordre :

The licensee must be compliant with s.8 (3) of the LTCHA.
Specifically, the licensee shall ensure:

- a) That a process is developed, implemented and documented in the home to ensure that least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times.
- b) That a comprehensive assessment of registered staffing plans is completed to achieve compliance with LTCHA, 2007, S.O.2007, c.8, s.8 (3).
Once the assessment is completed, strategies to hire staff must be pursued to ensure that there is a back-up plan in place for registered nursing staff that addresses situations when staff cannot come to work, strategies are to be documented and maintained in the home.

Grounds / Motifs :

1. The licensee has failed to comply with compliance order #001 from inspection #2018_735659_0020 that was served on November 28, 2018, with a compliance due date of March 29, 2019, to ensure that there was at least one registered nurse who was an employee of the licensee and member of the regular nursing staff on duty and present at all times unless there was an allowable exception to this requirement.

A review of the home's registered staff schedules, from March 30 to May 9,

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2019, showed that 57 of 124 (45.9 per cent) of the Registered Nurse (RN) shifts were covered by a Registered Practical Nurse (RPN). They were evening and night shifts.

A review of the home's recruitment efforts showed ongoing advertisement for RNs on various websites, newspaper and job fairs. A job fair was held on May 9, 2019 at a local college.

Executive Director (ED) #102 stated that they currently had one full time vacancy for a RN and acknowledged that they used RPNs, as needed, to cover RN shifts.

The licensee had failed to ensure that there was at least one registered nurse who was an employee of the licensee and member of the regular nursing staff on duty and present at all times unless there was an allowable exception to this requirement.

The severity of this issue was level 1 as there was no harm or risk identified to the residents. The scope was 3, widespread with the potential to affect a large number of residents. The compliance history was level 5 as there was multiple non - compliance with at least one related to the order.

This legislation was previously issued as a compliance order on:

November 28, 2018 under inspection #2018_735659_0020 with a compliance due date of March 29, 2019;

July 18, 2018 under inspection ##2018_735659_0012 with a compliance due date of October 15, 2018;

Nov 21, 2017 under inspection #2017_363659_0025 with a compliance due date of January 31, 2018.

A Director Referral was also made at this time;

October 17, 2016 under inspection #2016_508137_0023 with a compliance due date of November 30, 2016;

May 4, 2016 under inspection #2016_262523_0004 with a compliance due date of July 30, 2016;

June 22, 2015 under inspection #2015_259520_0018 with a compliance due date of September 30, 2015.



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2007, c. 8

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(137)

**This order must be complied with by /
Vous devez vous conformer à cet ordre d'ici le :**

Jan 01, 2020



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REVIEW/APPEAL 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 services for the Licensee.

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

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
Toronto, ON M5S 2B1
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, when service is made by a commercial courier it is deemed to be made on the second business day after the day the courier receives the document, 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 tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:



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Health Services Appeal and Review Board and the Director

Attention Registrar
Health Services Appeal and Review Board
151 Bloor Street West, 9th Floor
Toronto, ON M5S 1S4

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
Toronto, ON M5S 2B1
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.



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**RENSEIGNEMENTS RELATIFS AUX RÉEXAMENS DE DÉCISION ET AUX
APPELS**

PRENEZ AVIS :

Le/la titulaire de permis a le droit de faire une demande de réexamen par le directeur de cet ordre ou de ces ordres, et de demander que le directeur suspende cet ordre ou ces ordres conformément à l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée.

La demande au directeur doit être présentée par écrit et signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au/à la titulaire de permis.

La demande écrite doit comporter ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le/la titulaire de permis souhaite que le directeur examine;
- c) l'adresse du/de la titulaire de permis aux fins de signification.

La demande de réexamen présentée par écrit doit être signifiée en personne, par courrier recommandé, par messagerie commerciale ou par télécopieur, au :

Directeur
a/s du coordonnateur/de la coordonnatrice en matière d'appels
Direction de l'inspection des foyers de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11^e étage
Toronto ON M5S 2B1
Télécopieur : 416-327-7603



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Quand la signification est faite par courrier recommandé, elle est réputée être faite le cinquième jour qui suit le jour de l'envoi, quand la signification est faite par messagerie commerciale, elle est réputée être faite le deuxième jour ouvrable après le jour où la messagerie reçoit le document, et lorsque la signification est faite par télécopieur, elle est réputée être faite le premier jour ouvrable qui suit le jour de l'envoi de la télécopie. Si un avis écrit de la décision du directeur n'est pas signifié au/à la titulaire de permis dans les 28 jours de la réception de la demande de réexamen présentée par le/la titulaire de permis, cet ordre ou ces ordres sont réputés être confirmés par le directeur, et le/la titulaire de permis est réputé(e) avoir reçu une copie de la décision en question à l'expiration de ce délai.

Le/la titulaire de permis a le droit d'interjeter appel devant la Commission d'appel et de révision des services de santé (CARSS) de la décision du directeur relative à une demande de réexamen d'un ordre ou des ordres d'un inspecteur ou d'une inspectrice conformément à l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée. La CARSS est un tribunal autonome qui n'a pas de lien avec le ministère. Elle est créée par la loi pour examiner les questions relatives aux services de santé. Si le/la titulaire décide de faire une demande d'audience, il ou elle doit, dans les 28 jours de la signification de l'avis de la décision du directeur, donner par écrit un avis d'appel à la fois à :

la Commission d'appel et de révision des services de santé et au directeur

À l'attention du/de la registrateur(e)
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto ON M5S 1S4

Directeur
a/s du coordonnateur/de la coordonnatrice en matière
d'appels
Direction de l'inspection des foyers de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Toronto ON M5S 2B1
Télécopieur : 416-327-7603

À la réception de votre avis d'appel, la CARSS en accusera réception et fournira des instructions relatives au processus d'appel. Le/la titulaire de permis peut en savoir davantage sur la CARSS sur le site Web www.hsarb.on.ca.

Issued on this 13th day of June, 2019

Signature of Inspector /

Signature de l'inspecteur :

Name of Inspector /

Nom de l'inspecteur : MARIAN MACDONALD

Service Area Office /

Bureau régional de services : Central West Service Area Office