



**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 sous la
Loi de 2007 sur les foyers de
soins de longue durée**

**Health System Accountability and
Performance Division
Performance Improvement and
Compliance Branch**

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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**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jun 12, 2014	2014_183135_0040	L-000510-14	Critical Incident System

Licensee/Titulaire de permis

OAKWOOD RETIREMENT COMMUNITIES INC.
325 Max Becker Drive, Suite 201, KITCHENER, ON, N2E-4H5

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

THE VILLAGE OF RIVERSIDE GLEN
60 WOODLAWN ROAD EAST, GUELPH, ON, N1H-8M8

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

BONNIE MACDONALD (135)

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): June 4-5, 2014.

During the course of the inspection, the inspector(s) spoke with General Manager, Acting General Manager, Director of Nursing, Assistant Director of Nursing and Registered Nurse Clinical Support.

During the course of the inspection, the inspector(s) reviewed staffing records and staffing policy and procedure for Hiring. Observed resident care and services provided in resident home area.

The following Inspection Protocols were used during this inspection:



Dignity, Choice and Privacy
Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Table with 2 columns: Legend and Legendé. Legend includes WN (Written Notification), VPC (Voluntary Plan of Correction), DR (Director Referral), CO (Compliance Order), WAO (Work and Activity Order). Legendé includes Avis écrit, Plan de redressement volontaire, Aiguillage au directeur, Ordre de conformité, Ordres : travaux et activités. The table also contains a detailed description of non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) and its French equivalent under the LFSLD.

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 8. Policies, etc., to be followed, and records



Specifically failed to comply with the following:

s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,
(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).
(b) is complied with. O. Reg. 79/10, s. 8 (1).

Findings/Faits saillants :

1. The Licensee failed to ensure that the plan, policy, protocol, procedure, strategy or system, was complied with when the following occurred:

The home's Criminal Record Check policy for hiring of employees, October 2011 states:

New Team Members cannot begin providing service in the Village without a suitable Criminal Reference check /Vulnerable Sector Screen (VSS) check. At time of hiring the staff member must also provide a signed declaration disclosing any offence with which the person has been charged under the Criminal Code since the last reference check.

The Criminal Reference & VSS check must be:

b. Conducted within six months before the team member is hired.

Record review revealed that the staff member did not provide the home with a Criminal Reference check and VSS check within the 6 months of their hiring. At the time of hiring the staff member also did not provide the home with a signed declaration as per the home's policy.

During an interview with the Acting General Manager he confirmed his expectation that the policy for Criminal Reference/VSS checks be complied with when hiring new staff to ensure the safety and well-being of the residents. [s. 8. (1) (b)]



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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 ensuring that residents are protected from abuse by ensuring there is a process in place to ensure timely Criminal Reference and Vulnerable Sector Screen checks of staff prior to hiring, to be implemented voluntarily.

Issued on this 12th day of June, 2014

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