



**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
le Loi de 2007 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 East Service Area Office
419 King Street West Suite #303
OSHAWA ON L1J 2K5
Telephone: (905) 433-3013
Facsimile: (905) 433-3008

Bureau régional de services du
Centre-Est
419 rue King Ouest bureau 303
OSHAWA ON L1J 2K5
Téléphone: (905) 433-3013
Télécopieur: (905) 433-3008

Amended Public Copy/Copie modifiée du public de permis

Report Date(s)/ Date(s) du Rapport	Inspection No/ No de l'inspection	Log #/ No de registre	Type of Inspection / Genre d'inspection
Jul 04, 2018;	2018_414110_0008 (A1)	002875-18, 005121-18	Complaint

Licensee/Titulaire de permis

City of Toronto
55 John Street Metro Hall, 11th Floor TORONTO ON M5V 3C6

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

Seven Oaks
9 Neilson Road SCARBOROUGH ON M1E 5E1

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

Amended by DIANE BROWN (110) - (A1)

Amended Inspection Summary/Résumé de l'inspection modifié

A request was received by inspector #110 to extend the compliance date of order #001 to June 29, 2018. This Order report was amended to reflect the new approved compliance due date.



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

Original report signed by the inspector.



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The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): May 8 and 9, 2018.

Two complaints related to withholding approval for admission to a LTC home were inspected.

During the course of the inspection, the inspector(s) spoke with Administrator, Director of Nursing, Manager of Resident Services, Central East (CE) Local Health Integration Network (LHIN) placement coordinators.

During this inspection inspector #110 reviewed resident's health care records, application for admissions, Behavioral Support Assessments and refusal letters for admission.

The following Inspection Protocols were used during this inspection:

Admission and Discharge

During the course of the original 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	Legendé
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.) 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. 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 has failed to comply with section 44(7) of the LTCHA whereby the licensee refused the applications for applicants #001 and #002 for reasons other than provided for in the LTCHA. In addition, the licensee's response to the applicants failed to contain all of the required elements of section 44(9).

This inspection was initiated related to two complaints received by the Ministry of Health and Long Term Care. Both complaints pertained to Seven Oaks withholding approval for admission.

A record review was completed of resident #001's admission application and the home's response letter. The response letter from the Administrator of Seven Oaks



included details on the resident's behaviors and falls risk and concluded that the home was unable to serve resident #001's needs in a safe and effective manner.

An interview with the DOC revealed that the home had a Responsive Behavior and Falls Prevention Program.

In telephone interviews with Placement Coordinator #100 and Care Coordinator #101 both of whom have been involved in the assessment of resident #001, identified that resident #001's behaviors were manageable.

An interview with staff #103, Manager of Resident Services, identified they were part of the admissions team at the home that reviewed applications and files and chaired the weekly admissions committee. Staff #103 confirmed that they and a nursing manager reviewed resident #001's file. When asked the reason behind the admission refusal, staff #103 referred to notes on the Admission Committee/Permanent form for resident #001 which stated "refused related to behaviors".

An interview with the Administrator revealed their awareness behind the admission refusal for resident #001. When questioned as to the reason for the refusal, the Administrator stated that staff could not effectively provide the resident care due to their behaviours and shared supporting details.

The licensee had failed to demonstrate reasons for withholding admission to applicant #001. [s. 44. (7)]

2. A record review was completed of resident #002's admission application and the home's response letter.

An interview with Staff #103, Manager of Resident Services, confirmed that they were part of the admissions team at the home, that reviewed applications and files, and chaired the weekly admissions committee. Staff #103 recalled applicant #002. When questioned around the decision to refuse the applicants admission, staff #103 reviewed the applicant's file and identified behavioral details as to why the applicant was refused.

A telephone interview was conducted with the CE LHIN Placement Coordinator #105 and a review of the Placement Services Behavioural Assessment Tool was completed.



An interview with the Administrator revealed awareness behind the admission refusal of resident #002. The Administrator stated that the applicant has an underlying diagnosis and that nursing staff lack the expertise to provide care to this applicant was the reason for the refusal.

The licensee had failed to demonstrate reasons for withholding admission to applicant #002. [s. 44. (7)]

3. The licensee has failed to ensure that when withholding approval for admission, the licensee shall give a written notice setting out the ground or grounds on which the licensee is withholding approval; a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; an explanation of how the supporting facts justify the decision to withhold approval; and contact information for the Director. 2007, c. 8, s. 44 (9).

A record review was completed of resident #001's admission application and the home's response letter. The letter did not provide a detailed explanation of the supporting facts, as they related both to the home and to the applicant's condition and requirements for care, and an explanation of how the supporting facts justify the decision to withhold approval or the contact information for the Director.

During an interview with the Administrator they acknowledged that the letter did not include sufficient detail, as required, for withholding an approval of admission to resident #001.

4. A record review was completed of resident #002's admission application and the home's response letter. The letter did not provide a detailed explanation of the supporting facts, as they related both to the home and to the applicant's condition and requirements for care, and an explanation of how the supporting facts justify the decision to withhold approval or the contact information for the Director.

During an interview with the Administrator they acknowledged that the letter did not include sufficient detail, as required, for withholding an approval of admission to resident #002.



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Additional Required Actions:

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

(A1)The following order(s) have been amended:CO# 001



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

Original report signed by the inspector.



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Order(s) of the Inspector

Ordre(s) de l'inspecteur

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

Aux termes de l'article 153 et/ou de
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Name of Inspector (ID #) /

Nom de l'inspecteur (No) : Amended by DIANE BROWN (110) - (A1)

Inspection No. /

No de l'inspection : 2018_414110_0008 (A1)

Appeal/Dir# /

Appel/Dir#:

Log No. /

No de registre : 002875-18, 005121-18 (A1)

Type of Inspection /

Genre d'inspection: Complaint

Report Date(s) /

Date(s) du Rapport : Jul 04, 2018;(A1)

Licensee /

Titulaire de permis : City of Toronto
55 John Street, Metro Hall, 11th Floor, TORONTO,
ON, M5V-3C6

LTC Home /

Foyer de SLD : Seven Oaks
9 Neilson Road, SCARBOROUGH, ON, M1E-5E1

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur : Peter Puiatti



Order(s) of the Inspector

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O. 2007, chap. 8

To City of Toronto, you are hereby required to comply with the following order(s) by the date(s) set out below:

Order # /

Ordre no : 001

Order Type /

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

Pursuant to / Aux termes de :

LTCHA, 2007, 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;

(b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or

(c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44. (7).

Order / Ordre :

Order(s) of the Inspector**Ordre(s) de l'inspecteur**

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

1. The licensee must be compliant with s. 44(7) and s. 44(9) of the LTCHA.
2. The home shall cease the practice of withholding an applicant's approval unless:
 - (a) the home lacks the physical facilities necessary to meet the applicant's care requirements;
 - (b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or
 - (c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44(7).
3. The licensee shall immediately contact the appropriate placement coordinator at the Central East LHIN to request the most recent assessments for applicants #001 and #002 if the applicants are still choosing Seven Oaks.
4. The licensee shall accept applicant #001 and #002 unless as specified by this legislation.
5. Should the licensee withhold approval, the licensee must meet the requirements of s. 44(9) of the LTCHA and provide a notice addressing:
 - (a) the ground or grounds on which the licensee is withholding approval;
 - (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;
 - (c) an explanation of how the supporting facts justify the decision to withhold approval; and
 - (d) contact information for the Director. 2007, c. 8, s. 44 (9).

Grounds / Motifs :

1. The licensee has failed to comply with section 44(7) of the LTCHA whereby the licensee refused the applications for applicants #001 and #002 for reasons other than provided for in the LTCHA. In addition, the licensee's response to the applicants failed to contain all of the required elements of section 44(9).

This inspection was initiated related to two complaints received by the Ministry of Health and Long Term Care. Both complaints pertained to Seven Oaks withholding approval for admission.

A record review was completed of resident #001's admission application and the home's response letter. The response letter from the Administrator of Seven Oaks included details on the resident's behaviors and falls risk and concluded that the home was unable to serve resident #001's needs in a safe and effective manner.



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

An interview with the DOC revealed that the home had a Responsive Behavior and Falls Prevention Program.

In telephone interviews with Placement Coordinator #100 and Care Coordinator #101 both of whom have been involved in the assessment of resident #001, identified that resident #001's behaviors were manageable.

An interview with staff #103, Manager of Resident Services, identified they were part of the admissions team at the home that reviewed applications and files and chaired the weekly admissions committee. Staff #103 confirmed that they and a nursing manager reviewed resident #001's file. When asked the reason behind the admission refusal, staff #103 referred to notes on the Admission Committee/Permanent form for resident #001 which stated "refused related to behaviors".

An interview with the Administrator revealed their awareness behind the admission refusal for resident #001. When questioned as to the reason for the refusal, the Administrator stated that staff could not effectively provide the resident care due to their behaviours and shared supporting details.

The licensee had failed to demonstrate reasons for withholding admission to applicant #001. [s. 44. (7)]

A record review was completed of resident #002's admission application and the home's response letter.

An interview with Staff #103, Manager of Resident Services, confirmed that they were part of the admissions team at the home, that reviewed applications and files, and chaired the weekly admissions committee. Staff #103 recalled applicant #002. When questioned around the decision to refuse the applicants admission, staff #103 reviewed the applicant's file and identified behavioral details as to why the applicant was refused.

A telephone interview was conducted with the CE LHIN Placement Coordinator #105 and a review of the Placement Services Behavioural Assessment Tool was completed.

An interview with the Administrator revealed awareness behind the admission refusal



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of resident #002. The Administrator stated that the applicant has an underlying diagnosis and that nursing staff lack the expertise to provide care to this applicant was the reason for the refusal.

The licensee had failed to demonstrate reasons for withholding admission to applicant #002. [s. 44. (7)]

(110)



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2. The licensee has failed to ensure that when withholding approval for admission, the licensee shall give a written notice setting out the ground or grounds on which the licensee is withholding approval; a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; an explanation of how the supporting facts justify the decision to withhold approval; and contact information for the Director. 2007, c. 8, s. 44 (9).

A record review was completed of resident #001's admission application and the home's response letter. The letter did not provide a detailed explanation of the supporting facts, as they related both to the home and to the applicant's condition and requirements for care, and an explanation of how the supporting facts justify the decision to withhold approval or the contact information for the Director.

During an interview with the Administrator they acknowledged that the letter did not include sufficient detail, as required, for withholding an approval of admission to resident #001.

A record review was completed of resident #002's admission application and the home's response letter. The letter did not provide a detailed explanation of the supporting facts, as they related both to the home and to the applicant's condition and requirements for care, and an explanation of how the supporting facts justify the decision to withhold approval or the contact information for the Director.

During an interview with the Administrator they acknowledged that the letter did not include sufficient detail, as required, for withholding an approval of admission to resident #002.

The severity of this issue was determined to be a level 2, potential for harm.. The scope of the issue was a level 1, isolated. The home had a level 3 compliance history with no previous related areas of non-compliance.

(110)



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O. 2007, chap. 8

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

Jun 29, 2018(A1)



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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:

Health Services Appeal and Review Board and the Director



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Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

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

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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.

**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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foyers de soins de longue durée, L.
O. 2007, chap. 8

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)
151, rue Bloor Ouest, 9e étage
Toronto ON M5S 2T5

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 4 day of July 2018 (A1)

**Signature of Inspector /
Signature de l'inspecteur :**

**Name of Inspector /
Nom de l'inspecteur :**

Amended by DIANE BROWN - (A1)



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

Order(s) of the Inspector

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

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

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou de
l'article 154 de la Loi de 2007 sur les
foyers de soins de longue durée, L.
O. 2007, chap. 8

Service Area Office / Central East
Bureau régional de services :