



**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**

**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
performance et de la conformité**

**London Service Area Office  
291 King Street, 4th Floor  
LONDON, ON, N6B-1R8  
Telephone: (519) 675-7680  
Facsimile: (519) 675-7685**

**Bureau régional de services de  
London  
291, rue King, 4<sup>ém</sup> étage  
LONDON, ON, N6B-1R8  
Téléphone: (519) 675-7680  
Télécopieur: (519) 675-7685**

**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Jan 10, 2013	2013_185112_0003	L-001013-12	Critical Incident System

**Licensee/Titulaire de permis**

**REGIONAL MUNICIPALITY OF WATERLOO  
150 Frederick Street, KITCHENER, ON, N2A-4J3**

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

**SUNNYSIDE HOME  
247 FRANKLIN STREET NORTH, KITCHENER, ON, N2A-1Y5**

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

**CAROLE ALEXANDER (112)**

**Inspection Summary/Résumé de l'inspection**



**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**

---

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

**This inspection was conducted on the following date(s): January 07, 2013**

**This inspection covers the following Logs: L-001847-12, L-001512-12, L-001085-12 & L-001013-12**

**During the course of the inspection, the inspector(s) spoke with the Director of Care, Care Coordinator, Coordinator for Quality and Risk Management and 2 individual residents**

**During the course of the inspection, the inspector(s) reviewed 4 critical incidents, the home's related internal investigations, 2 clinical records, home's policies for prevention of abuse and neglect and related staff training.**

**The following Inspection Protocols were used during this inspection:  
Prevention of Abuse, Neglect and Retaliation**

**Findings of Non-Compliance were found during this inspection.**

---

**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**



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

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. 20. Policy to promote zero tolerance**

**Specifically failed to comply with the following:**

**s. 20. (1) Without in any way restricting the generality of the duty provided for in section 19, every licensee shall ensure that there is in place a written policy to promote zero tolerance of abuse and neglect of residents, and shall ensure that the policy is complied with. 2007, c. 8, s. 20 (1).**

---

**Findings/Faits saillants :**



**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**

---

1. The home's following policy was not complied with "Reporting Resident Abuse and/or Neglect" "Number: 7-12"

The home's policy states: "It is a mandatory requirement for all staff members who observe or suspect resident abuse, in any form to report the incident to a supervisor or manager immediately"

"The Administrator, Resident Care or designate will: "Immediately investigate the allegation of abuse" "Suspend, pending outcome of the investigation, any staff member allegedly involved in abuse"

An allegation of abuse and neglect was not reported until 18 days following the alleged incident date and therefore the Licensee did not commence their investigation for the 18 days. The alleged PSW staff member continued to work 11 full shifts from the date of the alleged incident until the Licensee began their investigation. [LTCH, 2007, c.8 s. 20. (1)]

---

**Issued on this 10th day of January, 2013**

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

A handwritten signature in black ink, appearing to be "S. H. J.", written in a cursive style.