



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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119 King Street West, 11th Floor
HAMILTON, ON, L8P-4Y7
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119, rue King Ouest, 11ième étage
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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
May 16, 2014	2014_300560_0007	H-000461-14	Critical Incident System

Licensee/Titulaire de permis

RYKKA CARE CENTRES LP
50 SAMOR ROAD, SUITE 205, TORONTO, ON, M6A-1J6

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

DUNDURN PLACE CARE CENTRE
39 MARY STREET, HAMILTON, ON, L8R-3L8

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

SUSAN PORTEOUS (560), MARILYN TONE (167)

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): May 12, 13 and 14, 2014.

During the course of the inspection, the inspector(s) spoke with the Administrator, Directors of Care (DOCs), Physiotherapist, registered nursing staff and personal support workers (PSWs).

During the course of the inspection, the inspector(s) reviewed the health record for an identified resident, relevant policies/procedures, registered staff and PSW work schedules and report sheets.

The following Inspection Protocols were used during this inspection:



**Falls Prevention
Hospitalization and Change in Condition**

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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.)</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 6.
Plan of care**



Specifically failed to comply with the following:

s. 6. (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,

(a) a goal in the plan is met; 2007, c. 8, s. 6 (10).

(b) the resident's care needs change or care set out in the plan is no longer necessary; or 2007, c. 8, s. 6 (10).

(c) care set out in the plan has not been effective. 2007, c. 8, s. 6 (10).

Findings/Faits saillants :

1. The licensee failed to ensure that the plan of care was reviewed and revised when the resident's care needs changed.

A) The resident sustained a fall in April 2014 at the home and was transferred to hospital. The resident returned from hospital the same day. No discharge information or instructions related to the specific care for the resident was provided by the hospital, other than a prescription. The home contacted the hospital and requested discharge care instructions for the resident the day the resident returned to the home, but were not provided with any information. The home received reports from the hospital which confirmed the resident's injury three days after they first requested the discharge information from the hospital.

B) Registered staff who cared for the resident after their return from hospital confirmed during interviews that they directed PSWs to support the resident's injured area. Interviews with PSWs who worked during this period confirmed this information was provided to them related to the care of the resident and was carried out.

C) It was noted that the document the home refers to as the care plan, was not reviewed and revised to include interventions to manage the injury until three days after the resident returned from hospital.

D) Although the care plan related to the resident's injury was revised on the same day the home received the resident's hospitalization reports and discharge diagnosis in April 2014, other parts of the care plan were not revised when the resident's needs changed.

E) The DOC confirmed during an interview that the entire care plan should have been reviewed and revised as required when the resident's care needs changed. [s. 6. (10) (b)]



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soins de longue durée

Additional Required Actions:

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

Issued on this 22nd day of May, 2014

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

Susan Porteous



Ministry of Health and
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Ministère de la Santé et
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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

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

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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

Public Copy/Copie du public

Name of Inspector (ID #) /
Nom de l'inspecteur (No) : SUSAN PORTEOUS (560), MARILYN TONE (167)

Inspection No. /
No de l'inspection : 2014_300560_0007

Log No. /
Registre no: H-000461-14

Type of Inspection /
Genre
d'inspection: Critical Incident System

Report Date(s) /
Date(s) du Rapport : May 16, 2014

Licensee /
Titulaire de permis : RYKKA CARE CENTRES LP
50 SAMOR ROAD, SUITE 205, TORONTO, ON,
M6A-1J6

LTC Home /
Foyer de SLD : DUNDURN PLACE CARE CENTRE
39 MARY STREET, HAMILTON, ON, L8R-3L8

Name of Administrator /
Nom de l'administratrice
ou de l'administrateur : DEBBIE BOAKES

To RYKKA CARE CENTRES LP, you are hereby required to comply with the following order(s) by the date(s) set out below:



Ministry of Health and
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Ministère de la Santé et
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Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
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Ordre(s) de l'inspecteur
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de l'article 154 de la *Loi de 2007 sur les foyers
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Order # /

Ordre no : 001

Order Type /

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

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 6. (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,

- (a) a goal in the plan is met;
- (b) the resident's care needs change or care set out in the plan is no longer necessary; or
- (c) care set out in the plan has not been effective. 2007, c. 8, s. 6 (10).

Order / Ordre :

The licensee shall ensure that residents are reassessed and their plans of care reviewed and revised at least every six months and at any other time when the resident's care needs change or care set out in the plan is no longer necessary.

Grounds / Motifs :



1. Previous non-compliance was issued under s 6 (10)b. on June 28, 2011 (VPC), August 12, 2011 (VPC), May 25, 2012 (VPC), January 30, 2013 (WN), August 2, 2013 (CO) and February 27, 2014 (CO).

The licensee failed to ensure that the plan of care was reviewed and revised when the resident's care needs changed.

A) The resident sustained a fall in April 2014 at the home and was transferred to hospital. The resident returned from hospital the same day. No discharge information or instructions related to the specific care for the resident was provided by the hospital, other than a medication prescription. The home contacted the hospital and requested discharge care instructions for the resident the day the resident returned to the home, but were not provided with any information. The home received the resident's x-ray reports confirming an injury three days after they first requested the information from the hospital.

B) Registered staff who cared for the resident after their return from hospital confirmed during interviews that they directed PSWs to support the resident's injured area. Interviews with PSWs who worked during this period confirmed this information was provided to them related to the care of the resident and was carried out.

C) It was noted that the document the home refers to as the care plan, was not reviewed and revised to include interventions to manage the the injury until three days after the resident returned from hospital.

D) Although the care plan related to the resident's injury was revised on the same day the home received the resident's hospitalization reports and discharge diagnosis in April 2014, other parts of the care plan were not revised when the resident's needs changed.

E) The DOC confirmed during an interview that the entire care plan should have been reviewed and revised as required when the resident's care needs changed.

(560)



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Ordre(s) de l'inspecteur
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**This order must be complied with by /
Vous devez vous conformer à cet ordre d'ici le :**

Jun 30, 2014



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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 or by fax upon:

Director
c/o Appeals Coordinator
Performance Improvement and Compliance 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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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing 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

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

Director
c/o Appeals Coordinator
Performance Improvement and Compliance
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 SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

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

La demande de réexamen doit contenir ce qui suit :

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

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11^e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



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Ordre(s) de l'inspecteur

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de l'article 154 de la *Loi de 2007 sur les foyers
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En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la
conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this 16th day of May, 2014

Signature of Inspector /

Signature de l'inspecteur :

Susan Porteous

Name of Inspector /

Nom de l'inspecteur :

Susan Porteous

Service Area Office /

Bureau régional de services : Hamilton Service Area Office