



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

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

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

**Rapport d'inspection 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
500 Weber Street North
WATERLOO ON N2L 4E9
Telephone: (888) 432-7901
Facsimile: (519) 885-9454

Bureau régional de services du
Centre-Ouest
500 rue Weber Nord
WATERLOO ON N2L 4E9
Téléphone: (888) 432-7901
Télécopieur: (519) 885-9454

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Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
May 30, 2018	2018_737640_0016	010976-18	Complaint

Licensee/Titulaire de permis

Vigour Limited Partnership on behalf of Vigour General Partner Inc.
302 Town Centre Blvd Suite 300 MARKHAM ON L3R 0E8

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

Tullamore Care Community
133 Kennedy Road South BRAMPTON ON L6W 3G3

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

HEATHER PRESTON (640)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): May 29, 2018

This inspection was conducted as an off site inspection and was related to Log #010976-18 regarding the refusal to accept an applicant for admission.

During the course of the inspection, the inspector(s) spoke with Acting Director of Care, Resident Relations Coordinator, Administrator and the Central West Local Health Integration Network.

The following Inspection Protocols were used during this inspection:



Admission and Discharge

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

1 WN(s)

1 VPC(s)

0 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).	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. 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).

Findings/Faits saillants :



1. The licensee failed to take into account the assessments and information under subsection 43 (6), and approve an applicant's admission to the home unless:
a) the home lacked the physical facilities necessary to meet the applicant's care requirements; b) the staff of the home lacked the nursing expertise necessary to meet the requirements; or c) circumstances existed which were provided for in the regulations as being a ground for withholding approval.

As a result of the complaint inspection related to refusal of admission of applicant #001, the Long-Term Care Home (LTCH) Inspector received a letter of refusal to accept the applicant for admission dated a specified date in September, 2017 from the Central West Local Health Integration Network (CW LHIN).

Applicant #001 had been deemed eligible for admission to long-term care by a Placement Coordinator at the CW LHIN in November 2016, and had applied to Tullamore Care Community for admission at that time.

The DOC did not have a file or copy of the original application package and was unable to provide detailed explanation of the refusal as to how the physical facility was unable to meet the needs of the applicant however, the RRC stated the CW LHIN had informed them the resident had responsive behaviours. They stated the home did not have a secure home area and the hallways were narrow putting the residents at risk.

The DOC confirmed the home had Behaviour Support Ontario (BSO) on site and a functioning WanderGuard system throughout the building.

The LTCH Inspector reviewed with the DOC that the home had access to High Intensity Needs (HIN) funding from the Ministry of Health and Long Term Care (MOHLTC) wherein funds could be made available for staffing needs related to the care of the applicant.

The LTCH Inspector reviewed the legislative requirements to be included in the letter of refusal to accept the applicant for admission.

During an interview with the Acting Administrator, they acknowledged the refusal to accept applicant #001's application for admission and was not able to validate the legislative rationale for the refusal used in the letter. [s. 44. (7)]



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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 the licensee must take into account the assessments and information under subsection 43 (6), and approve an 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 requirements; or c) circumstances exist which were provided for in the regulations as being a ground for withholding approval, to be implemented voluntarily.

Issued on this 4th day of June, 2018

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

Original report signed by the inspector.