



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

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

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 347 Preston St, 4th Floor  
 OTTAWA, ON, K1S-3J4  
 Telephone: (613) 569-5602  
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 347, rue Preston, 4<sup>ième</sup> étage  
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jul 22, Aug 4, 9, 2011	2011_044161_0011	Complaint

Licensee/Titulaire de permis

DEEM MANAGEMENT LIMITED  
 2 QUEEN STREET EAST, SUITE 1500, TORONTO, ON, M5C-3G5

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

WELLINGTON HOUSE NURSING HOME  
 990 EDWARD STREET NORTH, P.O. BOX 1510, PRESCOTT, ON, K0E-1T0

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

KATHLEEN SMID (161)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with five residents, the Administrator, Director of Care and a Registered Nurse.

During the course of the inspection, the inspector(s) observed all resident accommodation, reviewed the licensee's Registered Nursing staff rotation from July 1 - 20, 2011 and back up plan for nursing and personal care staffing.

The following Inspection Protocols were used in part or in whole during this inspection:

Dignity, Choice and Privacy

Sufficient Staffing

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Definitions	Définitions
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	WAO – Ordres : travaux et activités



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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. 8. Nursing and personal support services**

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

s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

s. 8. (4) During the hours that an Administrator or Director of Nursing and Personal Care works in that capacity, he or she shall not be considered to be a registered nurse on duty and present in the long-term care home for the purposes of subsection (3), except as provided for in the regulations. 2007, c. 8, s. 8 (4).

**Findings/Faits sayants :**

1. The licensee failed to comply with s.8(3) to ensure that at least one Registered Nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations.
2. The shifts not being covered were not a result of an emergency; therefore, the exception to the requirement that at least one Registered Nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations are not applicable as per O. Reg 79/10 (45) (1)
3. Registered Nurse staffing schedule from July 1 - 20, 2011 was reviewed. There was not a Registered Nurse on duty and present at all times on July 7, 9, 10, 12, 13, 14, 15, 16, 17, 20, 2011.
4. The shifts not being covered were not a result of an emergency; therefore, the exception to the requirement that at least one Registered Nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times
5. The licensee failed to comply with s.8(4) related to ensuring that the Director of Nursing, while working in that capacity, is not considered to be a registered nurse on duty and present in the home.
6. The licensee's Registered Nurse rotation for July 2011 was reviewed with the Director of Care.
7. On the day shift of July 11, 2011 the home did not have a Registered Nurse on duty.
8. On July 11, 2011 the Director of Care worked in the capacity as a Director of Care.
9. On the day shift of July 11, 2011, the Director of Care stated she was considered by the licensee to be a Registered Nurse on duty and present in the long-term care home for the purposes of subsection 8(3) of the Act.

**Additional Required Actions:**

**CO # - 001, 002 will be served on the licensee. Refer to the "Order(s) of the Inspector".**

**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 31. Nursing and personal support services**



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Specifically failed to comply with the following subsections:

s. 31. (3) The staffing plan must,

- (a) provide for a staffing mix that is consistent with residents' assessed care and safety needs and that meets the requirements set out in the Act and this Regulation;
- (b) set out the organization and scheduling of staff shifts;
- (c) promote continuity of care by minimizing the number of different staff members who provide nursing and personal support services to each resident;
- (d) include a back-up plan for nursing and personal care staffing that addresses situations when staff, including the staff who must provide the nursing coverage required under subsection 8 (3) of the Act, cannot come to work; and
- (e) be evaluated and updated at least annually in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices. O. Reg. 79/10, s. 31 (3).

**Findings/Faits sayants :**

1. The licensee failed to comply with r. 31. (3) to have a back-up plan for nursing and personal care staffing that addresses situations when staff cannot come to work, including 24/7 RN coverage.
2. The licensee's back-up plan for nursing and personal care was reviewed. It does not address situations when staff cannot come to work, including 24/7 RN coverage.

**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 to ensure that there is a back-up plan for nursing and personal care staffing that addresses situations when staff cannot come to work (including 24/7 RN coverage), to be implemented voluntarily.*

Issued on this 11th day of August, 2011

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



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

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

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

Public Copy/Copie du public

Name of Inspector (ID #) / Nom de l'inspecteur (No) : KATHLEEN SMID (161)
Inspection No. / No de l'inspection : 2011\_044161\_0011
Type of Inspection / Genre d'inspection: Complaint
Date of Inspection / Date de l'inspection : Jul 22, Aug 4, 9, 2011
Licensee / Titulaire de permis : DEEM MANAGEMENT LIMITED 2 QUEEN STREET EAST, SUITE 1500, TORONTO, ON, M5C-3G5
LTC Home / Foyer de SLD : WELLINGTON HOUSE NURSING HOME 990 EDWARD STREET NORTH, P.O. BOX 1510, PRESCOTT, ON, K0E-1T0
Name of Administrator / Nom de l'administratrice ou de l'administrateur : MARYLIN BENN

AMENDED - COMPLIANCE PLAN MUST BE SUBMITTED IN WRITING TO INSPECTOR KATHLEEN SMID ON OR BEFORE SEPTEMBER 1, 2011. Kathleen Smid August 25, 2011

To DEEM MANAGEMENT LIMITED, you are hereby required to comply with the following order(s) by the date(s) set out below:



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

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

**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*

**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. 8. (4) During the hours that an Administrator or Director of Nursing and Personal Care works in that capacity, he or she shall not be considered to be a registered nurse on duty and present in the long-term care home for the purposes of subsection (3), except as provided for in the regulations. 2007, c. 8, s. 8 (4).

**Order / Ordre :**

The licensee shall refrain from the Director of Nursing, while working in that capacity, to be considered to be a registered nurse on duty and present in the home.

**Grounds / Motifs :**

1. The licensee failed to comply with s.8(4) related to ensuring that the Director of Nursing, while working in that capacity, is not considered to be a registered nurse on duty and present in the home.
2. The licensee's Registered Nurse rotation for July 2011 was reviewed with the Director of Care.
3. On the day shift of July 11, 2011 the home did not have a Registered Nurse on duty.
4. On July 11, 2011 the Director of Care worked in the capacity as a Director of Care.
5. On the day shift of July 11, 2011, the Director of Care stated she was considered by the licensee to be a Registered Nurse on duty and present in the long-term care home for the purposes of subsection 8(3) of the Act. (161)

**This order must be complied with by /**

**Vous devez vous conformer à cet ordre d'ici le :** Aug 19, 2011

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Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

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 l'article 154 de la Loi de 2007 sur les foyers de soins de longue durée, L.O. 2007, chap. 8

Order # /  
Ordre no : 002

Order Type /  
Genre d'ordre : Compliance Orders, s. 153. (1) (b)

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

Order / Ordre :

The licensee shall prepare, submit and implement a plan for achieving compliance to ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

This plan must be submitted in writing to Inspector Kathleen Smid at 347 Preston Street, 4th floor, Ottawa Ontario K1S 3J4 or by fax at 1-613-569-9670 on or before August 19, 2011.

*September 1, 2011 KS  
Aug 25, 2011*

Grounds / Motifs :

1. The licensee failed to comply with s.8(3) to ensure that at least one Registered Nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations.
2. Registered Nurse staffing schedule from July 1 - 20, 2011 reviewed with the Director of Care. There was not a Registered Nurse on duty and present at all times on July 7, 9, 10, 12, 13,14, 15, 16, 17, 20, 2011.  
(161)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Sep 30, 2011



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

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

REVIEW/APEAL INFORMATION / RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

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 Clerk
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
55 St. Clair Ave. West
Suite 800, 8th floor
Toronto, ON M4V 2Y2
Fax: 416-327-760

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

c/o Appeals Clerk
Performance Improvement and Compliance Branch
55 St. Clair Avenue, West
Suite 800, 8th Floor
Toronto, ON M4V 2Y2

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.

Issued on this 11th day of August, 2011

Signature of Inspector /
Signature de l'inspecteur :

[Handwritten signature of Kathleen Smid]

Name of Inspector /
Nom de l'inspecteur :

KATHLEEN SMID

Service Area Office /

Bureau régional de services : Ottawa Service Area Office