



**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  
prévus 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  
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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
Oct 3, 4, 6, 12, 13, 2011	2011_078193_0023	Complaint

**Licensee/Titulaire de permis**

TORONTO LONG-TERM CARE HOMES AND SERVICES  
55 JOHN STREET, METRO HALL, 11th FLOOR, TORONTO, ON, M5V-3C6

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

WESBURN MANOR  
400 The West Mall, ETOBICOKE, ON, M9C-5S1

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

MONICA NOURI (193)

**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 family members, Nursing manager, Director of Care, Manager of Programs and Services and Administrator.

During the course of the inspection, the inspector(s) reviewed the home's Complaint management log and applicable home's policies and procedures related to complaints process.

The following Inspection Protocols were used during this inspection:

Reporting and Complaints

Findings of Non-Compliance were found during this inspection.

**NON-COMPLIANCE / NON-RESPECT DES EXIGENCES**

Legend	Legendé
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

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. 22. Licensee to forward complaints**

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

**s. 22. (1) Every licensee of a long-term care home who receives a written complaint concerning the care of a resident or the operation of the long-term care home shall immediately forward it to the Director. 2007, c. 8, s. 22 (1).**

**Findings/Faits saillants :**

1. An identified written complaint letter sent to the home on 2 different occasions, was not immediately forwarded to the Director.[s. 22(1)]
2. Other identified written complaint letter sent to the home was not forwarded to the Director.[s. 22(1)]

**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 100. Every licensee of a long-term care home shall ensure that the written procedures required under section 21 of the Act incorporate the requirements set out in section 101. O. Reg. 79/10, s. 100.**

**Findings/Faits saillants :**

The home's written complaint procedures in place do not incorporate the requirements set out in section 101 for dealing with complaints. For those complaints that cannot be investigated and resolved within 10 business days the acknowledgment of receipt of the complaint does not include the requirement to state the date by which the complainant can reasonably expect a resolution and a follow up response.[s. 100]

**WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 101. Dealing with complaints**

Specifically failed to comply with the following subsections:

s. 101. (1) Every licensee shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

1. The complaint shall be investigated and resolved where possible, and a response that complies with paragraph 3 provided within 10 business days of the receipt of the complaint, and where the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately.

2. For those complaints that cannot be investigated and resolved within 10 business days, an acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt of the complaint including the date by which the complainant can reasonably expect a resolution, and a follow-up response that complies with paragraph 3 shall be provided as soon as possible in the circumstances.

3. A response shall be made to the person who made the complaint, indicating,

i. what the licensee has done to resolve the complaint, or

ii. that the licensee believes the complaint to be unfounded and the reasons for the belief. O. Reg. 79/10, s. 101 (1).

s. 101. (2) The licensee shall ensure that a documented record is kept in the home that includes,

(a) the nature of each verbal or written complaint;

(b) the date the complaint was received;

(c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;

(d) the final resolution, if any;

(e) every date on which any response was provided to the complainant and a description of the response; and

(f) any response made in turn by the complainant. O. Reg. 79/10, s. 101 (2).

s. 101. (3) The licensee shall ensure that,

(a) the documented record is reviewed and analyzed for trends at least quarterly;

(b) the results of the review and analysis are taken into account in determining what improvements are required in the home; and

(c) a written record is kept of each review and of the improvements made in response. O. Reg. 79/10, s. 101 (3).

#### Findings/Faits saillants :

1.a) For a complaint from an identified person received by the licensee on an identified date, the acknowledgment provided to the complainant did not include the date by which the complainant can reasonably expect a resolution, and a follow up response was not made.[s. 101(1)2]

b) For a complaint from another identified person received by the licensee on an identified date, there was no acknowledgment of receipt of the complaint sent to the complainant.[s. 101(1)2]

2. The number of the complaints is taken in consideration at quarterly reviews for risk management indicators, but the complaints are not reviewed and analyzed and they are not taken in consideration in determining what improvements are required in the home, no record available of improvements made in response.[s. 101(3)(a)(b)(c)]

3. A complaint sent to the home was not documented in the complaint management log of the home.[s. 101(2)(a)(b)(c)(d)(e)(f)]

#### 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 by ensuring that for every complaint received a response will be provided within 10 business days, and if it cannot be investigated and resolved within 10 business days, an acknowledgment of receipt of the complaint including the date by which the complaint can reasonably expect a resolution is provided, to be implemented voluntarily.***



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WN #4: The Licensee has failed to comply with O.Reg 79/10, s. 103. Complaints — reporting certain matters to Director

Specifically failed to comply with the following subsections:

s. 103. (1) Every licensee of a long-term care home who receives a written complaint with respect to a matter that the licensee reports or reported to the Director under section 24 of the Act shall submit a copy of the complaint to the Director along with a written report documenting the response the licensee made to the complainant under subsection 101 (1). O. Reg. 79/10, s. 103 (1).

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Findings/Faits saillants :

The licensee did not submitted to the Director a copy of a written complaint from an identified person.[s. 103(1)]

Issued on this 13th day of October, 2011

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

A handwritten signature in black ink, appearing to read "M. Boen".