



**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**

Toronto Service Area Office  
5700 Yonge Street 5th Floor  
TORONTO ON M2M 4K5  
Telephone: (416) 325-9660  
Facsimile: (416) 327-4486

Bureau régional de services de  
Toronto  
5700 rue Yonge 5e étage  
TORONTO ON M2M 4K5  
Téléphone: (416) 325-9660  
Télécopieur: (416) 327-4486

**Public Copy/Copie du public**

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<b>Report Date(s) / Date(s) du rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Oct 19, 2018	2018_630589_0012	016669-18	Complaint

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**Licensee/Titulaire de permis**

The Wexford Residence Inc.  
1860 Lawrence Avenue East TORONTO ON M1R 5B1

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

The Wexford  
1860 Lawrence Avenue East SCARBOROUGH ON M1R 5B1

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

JOANNE ZAHUR (589)

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

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

**This inspection was conducted on the following date(s): October 4, 5, 12, 16 and 17, 2018.**

**This inspection was conducted as an off-site inspection.**

**During the course of the inspection, the inspector(s) spoke with the Chief Executive Officer (CEO), acting-Director of Care (a-DOC), Social Services Coordinator (SSC), Director of Programs and Life Enrichment (DPLE), Central East-Local Integrated Health Network-Placement Coordinator (CE-LHIN-PC), CE-LHIN-Assistant to the placement coordinator and CE-LHIN-Records.**

**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).**

**s. 44. (9) If the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out,**

**(a) the ground or grounds on which the licensee is withholding approval; 2007, c. 8, s. 44. (9).**

**(b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; 2007, c. 8, s. 44. (9).**

**(c) an explanation of how the supporting facts justify the decision to withhold approval; and 2007, c. 8, s. 44. (9).**

**(d) contact information for the Director. 2007, c. 8, s. 44. (9).**

### **Findings/Faits saillants :**

1. The licensee has failed to approve the 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 applicant's care

requirements; or

(c) circumstances exist which are provided for in the regulations as being a ground for withholding approval.

The Ministry of Health and Long-Term Care (MOHLTC) received a complaint in regards to applicant #001's approval for admission to the home was being withheld for a second



time.

Review of the written notice sent to applicant #001 indicated the home's decision to withhold their admission had been based on the criteria of Tier 1-lack of nursing expertise to manage responsive behaviours exhibited by applicant #001. The written notice further indicated that updates had been reviewed and that the home would continue to reject this application due to responsive behaviours exhibited by applicant #001 and as a result, this home was not the appropriate place to deliver the care required by applicant #001.

In a phone conversation, the CELHIN-PC #101 stated there was an identified purpose of this application. CELHIN-PC #101 indicated there had been an updated behavioural assessment sent to the long-term care home (LTCH) that indicated an improvement in applicant #001's responsive behaviours.

In a telephone interview, with the staff #103, staff #105 and staff #104, staff #103 stated that during a site visit to applicant #001's current LTCH, documentation notes indicated applicant #001 had exhibited responsive behaviours that they had been sent to hospital related to exhibiting these responsive behaviours. As well, staff #103 also stated a review of the most recent assessment indicated worsening responsive behaviours. Staff #103 further stated based on this information they concluded to withhold applicant #001's application for a second time based on the home's lack of nursing expertise required to manage these responsive behaviours.

A review of an assessment completed in 2018, indicated that applicant #001 was cognitively intact, and decision making skills of modified independence-some difficulty in new situations only. The assessment further indicated they exhibited responsive behaviours that were easily altered.

A review of an assessment completed on an identified date in 2017, indicated applicant #001 exhibited the same responsive behaviours as identified in the most recent assessment. Further review of the assessment completed in 2017, indicated responsive behaviours were exhibited one to three days in the last seven days and behaviours had not been present or were easily altered.

Staff #103 acknowledged the home has an internal responsive behaviour team, support from a Psychiatric Outreach Program (POP) nurse and an external psychiatrist, 18 staff trained in the Physical, Intellectual, Emotional, Capabilities, Environment and Social



(P.I.E.C.E.S.) framework, 60 per cent of frontline staff were trained in 2017, on Gentle Persuasive Approach (GPA), and annual education on responsive behaviours is provided to staff via Surge; an on-line education system.

As a result of the previously mentioned education and supports in the home, staff #103 verified the staff at the home do possess the nursing expertise to manage residents that exhibit responsive behaviours.

In a telephone interview, staff #103 and staff #106, staff #103 continued to acknowledge and maintain that applicant #001 was not a suitable resident for their LTCH and the safety of the other residents needed to be considered even though the home had demonstrated the staff did possess the nursing expertise to manage responsive behaviours as evidenced by an internal responsive behaviour team, training provided to staff and external supports available to the home. [s. 44. (7) (b)]

2. The licensee has failed to ensure that when an application is withheld, the written notice has provided a detailed explanation of the supporting facts, as they relate to the home and the applicant's condition and requirement for care, an explanation of how the supporting facts justify the decision to withhold approval and the contact information for the Director.

The Ministry of Health and Long -Term Care (MOHLTC) received a complaint in regards to applicant #001's approval for admission to the home was being withheld for a second time.

Review of the written notice to withhold sent to applicant #001 indicated the home's decision to withhold their admission had been based on a lack of nursing expertise to manage responsive behaviours exhibited by applicant #001. The written notice further indicated that updates had been reviewed and that the home would continue to reject this application due to responsive behaviours exhibited by applicant #001 and as a result, this home was not the appropriate place to deliver the care required by applicant #001.

Further review of the written notice indicated the LTCH had not provided a detailed explanation of the above mentioned supporting facts, as they related to both the home and to the applicant's condition and requirements for care as well as an explanation of how the above mentioned supporting facts justified the decision to withhold approval. The written notice indicated it had been copied to the Central East-Local Health Integrated Network (CE-LHIN) and Central Intake Assessment and Triage Team (CIATT) however the home had failed to provide the applicant with contact information for the



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A-DOC #103 acknowledged the written notice did not include the contact information for the Director. [s. 44. (9)]

***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 when an application is withheld, the written notice provides a detailed explanation of the supporting facts, as they relate to the home and the applicant's condition and requirement for care, an explanation of how the supporting facts justify the decision to withhold approval and the contact information for the Director, and to ensure the home 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,***

***(b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or***

***(c) circumstances exist which are provided for in the regulations as being a ground for withholding approval, to be implemented voluntarily.***

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Issued on this 19th day of October, 2018

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

**Original report signed by the inspector.**