



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

Division de la responsabilisation et de la  
performance du système de santé  
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### Public Copy/Copie du public

| Report Date(s) /<br>Date(s) du Rapport | Inspection No /<br>No de l'inspection | Log # /<br>Registre no | Type of Inspection /<br>Genre d'inspection |
|--|---------------------------------------|------------------------|--|
| Jul 29, 2013                           | 2013_105130_0015                      | H-002247-<br>12        | Complaint                                  |

#### Licensee/Titulaire de permis

ST. PETER'S CARE CENTRES  
125 Redfern Ave, HAMILTON, ON, L9C-7W9

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

ST. PETER'S RESIDENCE AT CHEDOKE  
125 Redfern Avenue, HAMILTON, ON, L9C-7W9

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

GILLIAN TRACEY (130)

### 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): June 17, 18, 19 and 20, 2013

PLEASE NOTE: This inspection was conducted simultaneously with the following inspections: H-001221-12, H-000100-13 and H-000140-13. Seven areas of non-compliance were found related to the Licensee's failure to comply with security of drug supply, initial plan of care, abuse policy, plan of care, Residents' Bill of Rights, and required programs. These areas of non-compliance [ O.Reg.79/10, r. 130. (1), r. 24 (7), r. 48 (1), r. 24. (7) and LTCH Act, 2007, S.O. 2007, c. 8, s. 20 (1), s. 6. (7) and s. 3 (1) 2 were issued in inspection # 2013\_105130\_0016/H-001221-12 conducted on June 17, 18, 19, 20, 21, 2013 and are contained in the report of that inspection.

During the course of the inspection, the inspector(s) spoke with The Administrator, Director of Care, Assistant Director of Care, RAI Coordinator, Registered Staff, personal support workers and residents.

During the course of the inspection, the inspector(s) Toured the home, reviewed clinical records, relevant policies and procedures, interviewed staff, residents and observed care related to H-002247-12.

There are no findings of Non-Compliance as a result of 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.

Issued on this 29th day of July, 2013

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

*Gillian Tracey*