



**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**

**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  
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## **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 # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
May 10, 2015	2015_248214_0012	H-000240-14	Complaint

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### **Licensee/Titulaire de permis**

THE REGIONAL MUNICIPALITY OF NIAGARA  
2201 ST. DAVID'S ROAD THOROLD ON L2V 4T7

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

THE WOODLANDS OF SUNSET  
920 PELHAM STREET WELLAND ON L3C 1Y5

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

CATHY FEDIASH (214)

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## **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): April 22, 2015**

**During the course of the inspection, the inspector(s) spoke with the Director of Resident Care (DRC). The inspector also reviewed staffing schedules, the home's staffing plan and relevant policies and procedures.**

**The following Inspection Protocols were used during this inspection:**



Sufficient Staffing

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

- 3 WN(s)
- 0 VPC(s)
- 0 CO(s)
- 0 DR(s)
- 0 WAO(s)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification  VPC – Voluntary Plan of Correction  DR – Director Referral  CO – Compliance Order  WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit  VPC – Plan de redressement volontaire  DR – Aiguillage au directeur  CO – Ordre de conformité  WAO – Ordres : travaux et activités</p>
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

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**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 8. Policies, etc., to be followed, and records**

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

**s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,**

**(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).**

**(b) is complied with. O. Reg. 79/10, s. 8 (1).**

**Findings/Faits saillants :**

1. The licensee did not ensure that any plan, policy, protocol, procedure, strategy or system was in compliance with and was implemented in accordance with applicable requirements under the Act.

A review of the home's policy titled, Staffing Plan for Registered Nursing Staff and HCA/PSW (HR00-013 and dated with a revision date of August 20, 2013) which also contains the home's staffing plan, indicated the following:

i) Under the title, Staffing Plan, it indicated that all attempts are to be made to replace the RN during the affected shift, with every attempt made to avoid overtime; however; also included: depending on the skill level, the RPN in the building assumes the role of Charge Nurse in the Home in the absence of the RN.

ii) Under the title, Staffing Plan for 120 beds, it indicated that for staff shortages for the RN position during the night shift, the home will call replacement staff; contact other homes; ask staff if they can change their shift; offer overtime to all staff; consider the day shift and evening shift doing 1/2 shift each; contact other homes for overtime including Infection control nurse and nursing management; contact nursing agency and nurse has been oriented to home; however; also included: RPN in charge with DRC on call in urgent situations.

The Ontario Regulation 79/10, specifically r. 45(1)2.i. indicates that the following are the exceptions 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, as required under subsection 8(3) of the Act: For homes with a licensed bed capacity of more than 64 beds and fewer than 129 beds, in the case of a planned or extended leave of absence of an employee of the licensee who is a registered nurse and a member of the regular nursing staff, a registered nurse who works at the home pursuant to a contract or agreement with the licensee and who is a member of the regular nursing staff may be used if,

- A. The Director of Nursing and Personal Care or a registered nurse who is both an employee of the licensee and a member of the regular nursing staff is available by telephone, and
- B. A registered practical nurse who is both an employee of the licensee and a member of the regular nursing staff is on duty and present in the home.

An interview with the DRC confirmed that the home's policy that included, "depending on the skill level, the RPN in the building assumes the role of Charge Nurse in the Home in the absence of the RN" as well as "RPN in charge with DRC on call in urgent situations" does not meet the requirements set out in Long-Term Care Homes Act, 2007 [s.8(3)] and the requirements set out in the Ontario Regulation 79/10 [r.45(1)2.i.] [s. 8. (1) (a)]

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



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

**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; O. Reg. 79/10, s. 31 (3).**

**(b) set out the organization and scheduling of staff shifts; O. Reg. 79/10, s. 31 (3).**

**(c) promote continuity of care by minimizing the number of different staff members who provide nursing and personal support services to each resident; O. Reg. 79/10, s. 31 (3).**

**(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 O. Reg. 79/10, s. 31 (3).**

**(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 saillants :**

1. The licensee failed to ensure that the staffing plan was evaluated and updated at least annually in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices.

A review of the home's staffing plan which is encompassed in the policy titled, Staffing Plan for Registered Nursing Staff and HCA/PSW (HR00-013 and dated with a revision date of August 20, 2013) indicated that the staffing plan was not evaluated and updated at least annually in accordance with evidence-based practices and, if there were none, in accordance with prevailing practices as identified by the most current revision date of August 20, 2013. The DRC confirmed the last revision date on the policy which includes the home's staffing plan, was August 20, 2013. [s. 31. (3)]

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**WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 45. 24-hour nursing care — exceptions**

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



**s. 45. (1) The following are the exceptions 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, as required under subsection 8 (3) of the Act:**

**1. For homes with a licensed bed capacity of 64 beds or fewer,**

**i. a registered nurse who works at the home pursuant to a contract or agreement between the nurse and the licensee and who is a member of the regular nursing staff may be used,**

**ii. in the case of an emergency where the back-up plan referred to in clause 31 (3) (d) of this Regulation fails to ensure that the requirement under subsection 8 (3) of the Act is met,**

**A. a registered nurse who works at the home pursuant to a contract or agreement between the licensee and an employment agency or other third party may be used if the Director of Nursing and Personal Care or a registered nurse who is both an employee of the licensee and a member of the regular nursing staff is available by telephone, or**

**B. a registered practical nurse who is a member of the regular nursing staff may be used if the Director of Nursing and Personal Care or a registered nurse who is both an employee of the licensee and a member of the regular nursing staff is available by telephone. O. Reg. 79/10, s. 45 (1).**

**2. For homes with a licensed bed capacity of more than 64 beds and fewer than 129 beds,**

**i. in the case of a planned or extended leave of absence of an employee of the licensee who is a registered nurse and a member of the regular nursing staff, a registered nurse who works at the home pursuant to a contract or agreement with the licensee and who is a member of the regular nursing staff may be used,**

**ii. in the case of an emergency where the back-up plan referred to in clause 31 (3) (d) of this Regulation fails to ensure that the requirement under subsection 8 (3) of the Act is met, a registered nurse who works at the home pursuant to a contract or agreement between the licensee and an employment agency or other third party may be used if,**

**A. the Director of Nursing and Personal Care or a registered nurse who is both an employee of the licensee and a member of the regular nursing staff is available by telephone, and**

**B. a registered practical nurse who is both an employee of the licensee and a member of the regular nursing staff is on duty and present in the home. O. Reg. 79/10, s. 45 (1).**

**Findings/Faits saillants :**

1. The licensee failed to ensure that the following exceptions 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 was on duty and present in the home at all times, as required under subsection 8 (3) of the Act: 2.i. For homes with a licensed bed capacity of more than 64 beds and fewer than 129 beds, in the case of a planned or extended leave of absence of an employee of the licensee who is a registered nurse and a member of the regular nursing staff, a registered nurse who works at the home pursuant to a contract or agreement with the licensee and who is a member of the regular nursing staff may be used, if, A. the Director of Nursing and Personal Care or a registered nurse who is both an employee of the licensee and a member of the regular nursing staff is available by telephone, and B. a registered practical nurse who is both an employee of the licensee and a member of the regular nursing staff is on duty and present in the home. O. Reg. 79/10, s. 45 (1).

A review of the registered staffing schedule for Registered Nurses (RN) for an identified period of seven consecutive dates in February 2014, indicated that on three identified dates during this time, no RN was scheduled for these night shifts of 2300 hours until 0700 hours. A review of the registered staffing schedule for Registered Practical Nurses (RPN) for the same identified period of seven consecutive dates in February 2014, indicated that RPN staff were the only registered staffing member's in place on the three identified dates during this time for the night shift of 2300 hours until 0700 hours. An interview with the DRC confirmed that the RN scheduled to work the above identified night shifts had not been able to attend their scheduled night shifts and that the home did not have an RN in place for these night shifts of 2300 hours until 0700 hours and only had RPN's in place. [s. 45. (1) 2. i.]

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**Issued on this 11th day of May, 2015**

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

**Original report signed by the inspector.**