

**Inspection Report under  
the Long-Term Care  
Homes Act, 2007**

**Rapport d'inspection en vertu de  
la Loi de 2007 sur les foyers de  
soins de longue durée**

**Long-Term Care Operations Division  
Long-Term Care Inspections Branch**

**Division des opérations relatives aux  
soins de longue durée  
Inspection de soins de longue durée**

Central East Service Area Office  
33 King Street West, 4th Floor  
OSHAWA ON L1H 1A1  
Telephone: (905) 440-4190  
Facsimile: (905) 440-4111

Bureau régional de services de  
Centre-Est  
33, rue King Ouest, étage 4  
OSHAWA ON L1H 1A1  
Téléphone: (905) 440-4190  
Télécopieur: (905) 440-4111

**Public Copy/Copie du rapport public**

---

<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>
Feb 23, 2021	2021_640601_0004	022231-20, 025834-20	Complaint

---

**Licensee/Titulaire de permis**

St. Joseph's at Fleming  
659 Brealey Drive Peterborough ON K9K 2R8

---

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

St. Joseph's at Fleming  
659 Brealey Drive Peterborough ON K9K 2R8

---

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

KARYN WOOD (601)

---

**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): January 27, 28, 29, February 2, 3, 4, 8, and 9, 2021.**

**The following intakes were completed in this Complaint Inspection:**

**A log related to an application to the Long-Term Care Home being withheld.**

**A log related to care concerns and a missing article.**

**During the course of the inspection, the inspector(s) spoke with the Chief Executive Officer (CEO), Dietitian, Home Area Manager (HAM), Manager of Strategic Planning and Special Projects, Registered Nurses (RN), Registered Practical Nurses (RPN), Personal Support Workers (PSW), and a resident.**

**The inspector also reviewed resident health care records, observed the delivery of resident care and services, including staff to resident interactions.**

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

**Accommodation Services - Laundry**

**Admission and Discharge**

**Continence Care and Bowel Management**

**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**

<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>Légende</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>

**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 89. Laundry service**

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

- s. 89. (1) As part of the organized program of laundry services under clause 15 (1) (b) of the Act, every licensee of a long-term care home shall ensure that,**
- (a) procedures are developed and implemented to ensure that,**
    - (i) residents' linens are changed at least once a week and more often as needed,**
    - (ii) residents' personal items and clothing are labelled in a dignified manner within 48 hours of admission and of acquiring, in the case of new clothing,**
    - (iii) residents' soiled clothes are collected, sorted, cleaned and delivered to the resident, and**
    - (iv) there is a process to report and locate residents' lost clothing and personal items; O. Reg. 79/10, s. 89 (1).**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that as part of the organized program of laundry services under clause 15 (1) (b) of the Act, that the procedures developed to ensure the process to report and locate residents' lost personal items was implemented when the resident's personal item was reported to be missing.

A complaint was received by the Ministry of Long-Term Care (MLTC) regarding concerns that immediate action was not taken when a resident's Substitute Decision Maker (SDM) reported the resident was missing a personal item.

The "Missing Resident Articles" policy directed to complete the "Missing Resident Personal Article Report" upon communication from the resident's SDM regarding a resident missing a personal item. The progress notes indicated that the resident's SDM reported the resident's missing item and the laundry department was notified three days later. The "Missing Resident Personal Article Report" for the resident's missing item was completed three days after the item was reported missing and the Environmental Service Manager received the report seven days later. HAM #101 indicated the "Missing Resident Personal Article Report" should have been completed when the resident's SDM reported the personal item missing. HAM #101 acknowledged that the process developed to report missing personal articles was not followed, and the resident's missing item had not been located.

Sources: A resident's progress notes, the licensee's "Missing Resident Articles" policy and the "Missing Resident Personal Article Report", interviews with the Dietitian and HAM #101. [s. 89. (1) (a) (iv)]

### ***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 As part of the organized program of laundry services under clause 15 (1) (b) of the Act, every licensee of a long-term care home shall ensure that, (a) procedures are developed and implemented to ensure that, (iv) there is a process to report and locate residents' lost clothing and personal items, to be implemented voluntarily.***

**Issued on this 25th day of February, 2021**

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

**Original report signed by the inspector.**