

**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**

Sudbury Service Area Office  
159 Cedar Street Suite 403  
SUDBURY ON P3E 6A5  
Telephone: (705) 564-3130  
Facsimile: (705) 564-3133

Bureau régional de services de Sudbury  
159, rue Cedar Bureau 403  
SUDBURY ON P3E 6A5  
Téléphone: (705) 564-3130  
Télécopieur: (705) 564-3133

**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>
Nov 20, 2020	2020_565647_0018	017658-20, 019724-20	Complaint

**Licensee/Titulaire de permis**

Lakeland Long Term Care Services Corporation  
6 Albert Street PARRY SOUND ON P2A 3A4

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

Lakeland Long Term Care Services  
6 Albert Street PARRY SOUND ON P2A 3A4

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

JENNIFER BROWN (647), AMY GEAUVREAU (642), LOVIRIZA CALUZA (687)

**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): October 19 - 23, 26 - 29, 2020.**

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

**-two intakes related to staffing shortages affecting resident care.**

**Follow Up inspection 2020\_565647\_0020, Complaint inspection 2020\_565647\_0021 and Critical Incident System (CIS) inspection 2020\_565647\_0019, were completed concurrently with this Complaint inspection.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Assistant Director of Care (ADOC), Administrative Assistant (AA), Physician (MD), Restorative Care Coordinator (RCC), Registered Dietitian (RD), Physiotherapist (PT), Nursing Support Assistant, Nurse Manager (NM), Registered Nurses (RN), Registered Practical Nurses (RPN), Personal Support Workers (PSW), Dietary Aides, Housekeepers, and residents.**

**During the course of the inspection, the Inspector(s) also conducted a daily tour of the resident care areas, observed medication administration, observed dining and snack service, observed staff to resident interactions, resident to resident interactions, and the provisions of care, reviewed internal documents, and policies and procedures.**

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

**Dining Observation**

**Personal Support Services**

**Snack Observation**

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

**1 WN(s)**

**0 VPC(s)**

**1 CO(s)**

**0 DR(s)**

**0 WAO(s)**

**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**

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

**Legend**

WN – Written Notification  
 VPC – Voluntary Plan of Correction  
 DR – Director Referral  
 CO – Compliance Order  
 WAO – Work and Activity Order

**Légende**

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 O.Reg 79/10, s. 33. Bathing  
Specifically failed to comply with the following:**

**s. 33. (1) Every licensee of a long-term care home shall ensure that each resident of the home is bathed, at a minimum, twice a week by the method of his or her choice and more frequently as determined by the resident's hygiene requirements, unless contraindicated by a medical condition. O. Reg. 79/10, s. 33 (1).**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that three residents, at a minimum, received a tub bath or shower twice a week.

Two separate complaints were submitted that identified concerns that residents were not receiving their baths and/or showers twice a week as required.

a) One resident, stated that they were upset as they had not received their shower when it was scheduled.

A Personal Support Worker (PSW), indicated that the resident did not receive their shower when it was scheduled.

b) A review of another resident's Observation/Flow Sheet Monitoring form document identified that they did not have documentation for their scheduled shower.

A PSW, who had worked that day, stated that the resident did not receive their shower on their scheduled day.

c) A review of another resident's Observation/Flow Sheet Monitoring form document identified that they did not have documentation for their shower.

A PSW, who had worked that day stated that the resident did not receive their shower on their scheduled day.

The DOC confirmed that three residents were required to receive their bath/shower twice a week, and did not.

Sources: Personal Hygiene, Grooming, Dressing, and Bathing policy, last revised December 16, 2019; Daily staffing schedule compliment, interviews with a resident, three PSWs, and other staff. [s. 33. (1)]

***Additional Required Actions:***

***CO # - 001 will be served on the licensee. Refer to the “Order(s) of the Inspector”.***



**Ministry of Long-Term  
Care**

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

**Ministère des Soins de longue  
durée**

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

---

**Issued on this 20th day of November, 2020**

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

**Original report signed by the inspector.**

**Order(s) of the Inspector**

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

**Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

**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****Public Copy/Copie du rapport public****Name of Inspector (ID #) /**

**Nom de l'inspecteur (No) :** JENNIFER BROWN (647), AMY GEAUVREAU (642), LOVIRIZA CALUZA (687)

**Inspection No. /**

**No de l'inspection :** 2020\_565647\_0018

**Log No. /**

**No de registre :** 017658-20, 019724-20

**Type of Inspection /**

**Genre d'inspection:** Complaint

**Report Date(s) /**

**Date(s) du Rapport :** Nov 20, 2020

**Licensee /**

**Titulaire de permis :** Lakeland Long Term Care Services Corporation  
6 Albert Street, PARRY SOUND, ON, P2A-3A4

**LTC Home /**

**Foyer de SLD :** Lakeland Long Term Care Services  
6 Albert Street, PARRY SOUND, ON, P2A-3A4

**Name of Administrator /**

**Nom de l'administratrice ou de l'administrateur :** Steve White

---

To Lakeland Long Term Care Services Corporation, you are hereby required to comply with the following order(s) by the date(s) set out below:

**Order(s) of the Inspector**

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

**Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

---

**Order # /  
No d'ordre :** 001**Order Type /  
Genre d'ordre :** Compliance Orders, s. 153. (1) (a)**Pursuant to / Aux termes de :**

O.Reg 79/10, s. 33. (1) Every licensee of a long-term care home shall ensure that each resident of the home is bathed, at a minimum, twice a week by the method of his or her choice and more frequently as determined by the resident's hygiene requirements, unless contraindicated by a medical condition. O. Reg. 79/10, s. 33 (1).

**Order / Ordre :**

The licensee must comply with s. 33 (1) of O. Reg. 79/10.

Specifically, the licensee must:

- 1) Ensure residents are bathed at a minimum, twice a week by the method of their choice, unless contraindicated by a medical condition.
- 2) Develop and implement a process, that should a resident miss their bath/shower, that there is a way that it is made up, and that this is documented. This documentation will be provided to an Inspector when requested.

**Grounds / Motifs :**

1. 1. The licensee has failed to ensure that three residents, at a minimum, received a tub bath or shower twice a week.

Two separate complaints were submitted that identified concerns that residents were not receiving their baths and/or showers twice a week as required.

- a) One resident, stated that they were upset as they had not received their shower when it was scheduled.

A Personal Support Worker (PSW), indicated that the resident did not receive their shower when it was scheduled.

- b) A review of another resident's Observation/Flow Sheet Monitoring form

**Order(s) of the Inspector**

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

**Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

document identified that they did not have documentation for their scheduled shower.

A PSW, who had worked that day, stated that the resident did not receive their shower on their scheduled day.

c) A review of another resident's Observation/Flow Sheet Monitoring form document identified that they did not have documentation for their shower.

A PSW, who had worked that day stated that the resident did not receive their shower on their scheduled day.

The DOC confirmed that three residents were required to receive their bath/shower twice a week, and did not.

A Compliance order was made by taking the following factors into account:

**Severity:** There was minimal risk specifically to three residents, as they were required to receive their bath/shower twice a week, and did not.

**Scope:** The scope of these non-compliances were widespread as they affected 100 per cent of the residents inspected.

**Compliance History:** Two written notifications (WN), seven voluntary plans of correction (VPCs), and four COs were issued to the home. The four COs have previously been complied, and all were related to different sections of the legislation in the past 36 months.

**Sources:** Personal Hygiene, Grooming, Dressing, and Bathing policy, last revised December 16, 2019; Daily staffing schedule compliment, interviews with a resident, three PSWs, and other staff. (642)

**This order must be complied with /**

**Vous devez vous conformer à cet ordre d'ici le :**

Feb 05, 2021

**Order(s) of the Inspector**

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

**Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

**REVIEW/APPEAL INFORMATION****TAKE NOTICE:**

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail, commercial courier or by fax upon:

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Long-Term Care  
1075 Bay Street, 11th Floor  
Toronto, ON M5S 2B1  
Fax: 416-327-7603

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing, when service is made by a commercial courier it is deemed to be made on the second business day after the day the courier receives the document, and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

**Ministry of Long-Term Care****Order(s) of the Inspector**

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

**Ministère des Soins de longue durée****Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

**Health Services Appeal and Review Board and the Director**

Attention Registrar  
Health Services Appeal and Review Board  
151 Bloor Street West, 9th Floor  
Toronto, ON M5S 1S4

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Long-Term Care  
1075 Bay Street, 11th Floor  
Toronto, ON M5S 2B1  
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website [www.hsarb.on.ca](http://www.hsarb.on.ca).

**Order(s) of the Inspector**

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

**Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

**RENSEIGNEMENTS RELATIFS AUX RÉEXAMENS DE DÉCISION ET AUX APPELS****PRENEZ AVIS :**

Le/la titulaire de permis a le droit de faire une demande de réexamen par le directeur de cet ordre ou de ces ordres, et de demander que le directeur suspende cet ordre ou ces ordres conformément à l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée.

La demande au directeur doit être présentée par écrit et signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au/à la titulaire de permis.

La demande écrite doit comporter ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le/la titulaire de permis souhaite que le directeur examine;
- c) l'adresse du/de la titulaire de permis aux fins de signification.

La demande de réexamen présentée par écrit doit être signifiée en personne, par courrier recommandé, par messagerie commerciale ou par télécopieur, au :

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 416-327-7603

**Order(s) of the Inspector**

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

**Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

Quand la signification est faite par courrier recommandé, elle est réputée être faite le cinquième jour qui suit le jour de l'envoi, quand la signification est faite par messagerie commerciale, elle est réputée être faite le deuxième jour ouvrable après le jour où la messagerie reçoit le document, et lorsque la signification est faite par télécopieur, elle est réputée être faite le premier jour ouvrable qui suit le jour de l'envoi de la télécopie. Si un avis écrit de la décision du directeur n'est pas signifié au/à la titulaire de permis dans les 28 jours de la réception de la demande de réexamen présentée par le/la titulaire de permis, cet ordre ou ces ordres sont réputés être confirmés par le directeur, et le/la titulaire de permis est réputé(e) avoir reçu une copie de la décision en question à l'expiration de ce délai.

Le/la titulaire de permis a le droit d'interjeter appel devant la Commission d'appel et de révision des services de santé (CARSS) de la décision du directeur relative à une demande de réexamen d'un ordre ou des ordres d'un inspecteur ou d'une inspectrice conformément à l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée. La CARSS est un tribunal autonome qui n'a pas de lien avec le ministère. Elle est créée par la loi pour examiner les questions relatives aux services de santé. Si le/la titulaire décide de faire une demande d'audience, il ou elle doit, dans les 28 jours de la signification de l'avis de la décision du directeur, donner par écrit un avis d'appel à la fois à :

la Commission d'appel et de révision des services de santé et au directeur

À l'attention du/de la registrateur(e)  
Commission d'appel et de révision  
des services de santé  
151, rue Bloor Ouest, 9e étage  
Toronto ON M5S 1S4

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière  
d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 416-327-7603

À la réception de votre avis d'appel, la CARSS en accusera réception et fournira des instructions relatives au processus d'appel. Le/la titulaire de permis peut en savoir davantage sur la CARSS sur le site Web [www.hsb.on.ca](http://www.hsb.on.ca).

**Issued on this 20th day of November, 2020**

**Signature of Inspector /  
Signature de l'inspecteur :**

**Name of Inspector /  
Nom de l'inspecteur :** Jennifer Brown

**Service Area Office /  
Bureau régional de services :** Sudbury Service Area Office