



**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**

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch  
Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée**

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## **Public Copy/Copie du 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 21, 2018	2018_683126_0004	016165-17	Other

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

CITY OF OTTAWA

Community and Social Services, Long Term Care Branch 200 Island Lodge Road  
OTTAWA ON K1N 5M2

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

GARRY J. ARMSTRONG HOME

200 ISLAND LODGE ROAD OTTAWA ON K1N 5M2

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

LINDA HARKINS (126)

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

**The purpose of this inspection was to conduct an Other inspection.**

**This inspection was conducted on the following date(s): December 6, 7, 8, 11, 12, 13, 18, 19, 20 and 21, 2017**

**This inspection is a follow-up to a Director's Order issued by Karen Simpson, on July 19, 2017 as part of a Director Referral under Inspection # 2017\_620126\_0004, made in accordance with s. 152, paragraph 4 of the Long-Term Care Homes Act, 2007 (LTCHA).**

**It is noted that this inspection was done concurrently, at the Garry J. Armstrong**



**Home, with the following:**

- **Follow Up Inspection # 2017\_683126\_0024**
- **Critical Incident Inspection # 2017\_597655\_0020**
- **Complaint Inspection # 2017\_658178\_0019**

**It is noted that this inspection was done concurrently, at the Peter D. Clark Centre, with the following:**

- **Critical Incident Inspection # 2017\_617148\_0036**
- **Complaint Inspection # 2017\_708548\_0027**

**It is noted that this inspection was done concurrently, at Centre d'Accueil Champlain, with the following:**

- **Follow Up Inspection # 2017\_621547\_0019**
- **Critical Incident Inspection # 2017\_621547\_0020**

**During the course of the inspection, the inspector(s) spoke with the City of Ottawa Acting Director of Long Term Care, Administrator, Program Manager for Resident Care Services, Program Manager for Personal Care Services, registered and non-registered nursing staff, Manager of Recreation and Leisure, Long Term Care Trainer, Food Service Workers, Housekeeping staff as well as several residents.**

**During the course of the inspections, the inspector(s) reviewed several resident health care records including kardexes and the identification of culturally appropriate care needs; the home's Abuse Policy # 750.65(2017) in both French and English. They reviewed documents related to education including staff sign in sheets for: Prevention of Abuse and Neglect and Reporting Requirements; reviewed the course completion list of staff for Surge learning on the Abuse Policy; interviews with registered and non- registered nursing staff in regards to the home's Abuse Policy, education received and reporting requirements. The inspectors also reviewed education on supervision, evaluation tools used for supervision education and home's supervision audit processes; and conducted interviews with management and registered staff regarding supervision and audit processes. They reviewed the home's staff orientation program related to mandatory reporting and abuse as well as interviewed newly orientated staff in regards to received training. The inspection team reviewed Complaints Forms, Incident Reports investigation documents and the On-Call Manager binder for reporting requirements as well as interviewed staff involved in these processes.**



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**The inspectors observed the delivery of resident care and services, staff- resident and resident-resident interactions as well as interviewed residents regarding the care and services received.**

**It is noted that the Director's Order, related to LTCHA s. 19 (1) and LTCHA s. 6 (7) was found to be in compliance at the time of this inspection.**

**During the course of this inspection, Non-Compliances were not issued.**

**0 WN(s)**

**0 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**



**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

Legendé

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).

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 21st day of February, 2018

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

**Original report signed by the inspector.**