



**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 prévue
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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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Dec 5, 2018	2018_776613_0003	002754-18	Complaint

Licensee/Titulaire de permis

The Ontario-Finnish Resthome Association
725 North Street Sault Ste Marie ON P6B 5Z3

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

Mauno Kaihla Koti
723 North Street SAULT STE. MARIE ON P6B 6G8

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

LISA MOORE (613)

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): November 21-22, 2018.

The following intake was inspected during this Complaint Inspection:

One Complaint that was submitted to the Director, regarding concerns that an applicant had originally been accepted and then at a later date denied admission to the home.

A concurrent Critical Incident Inspection #2018_776613_0004 was also conducted during this inspection, and three on-site inquiries.

During the course of the inspection, the inspector(s) spoke with the Administrator, Executive Director of Care (EDOC) and the complainant.

The Inspector also conducted daily tours of resident care areas, observed the provision of care and services to residents, observed staff to resident interactions, reviewed the applicant's admission assessments and acceptance and refusal letters.

**The following Inspection Protocols were used during this inspection:
Admission and Discharge**

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

Legend	Légende
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	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 LTCHA, 2007 S.O. 2007, c.8, s. 44. Authorization for admission to a home



Specifically failed to comply with the following:

s. 44. (7) The appropriate placement co-ordinator shall give the licensee of each selected home copies of the assessments and information that were required to have been taken into account, under subsection 43 (6), and the licensee shall review the assessments and information and shall approve the applicant's admission to the home unless,

(a) the home lacks the physical facilities necessary to meet the applicant's care requirements; 2007, c. 8, s. 44. (7).

(b) the staff of the home lack the nursing expertise necessary to meet the applicant's care requirements; or 2007, c. 8, s. 44. (7).

(c) circumstances exist which are provided for in the regulations as being a ground for withholding approval. 2007, c. 8, s. 44. (7).

s. 44. (9) If the licensee withholds approval for admission, the licensee shall give to persons described in subsection (10) a written notice setting out,

(a) the ground or grounds on which the licensee is withholding approval; 2007, c. 8, s. 44. (9).

(b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; 2007, c. 8, s. 44. (9).

(c) an explanation of how the supporting facts justify the decision to withhold approval; and 2007, c. 8, s. 44. (9).

(d) contact information for the Director. 2007, c. 8, s. 44. (9).

Findings/Faits saillants :

1. The licensee has failed to ensure that they reviewed the assessments and information and approved the applicant's admission to the home unless, (a) the home lacked the physical facilities necessary to meet the applicant's care requirements; (b) the staff of the home lacked the nursing expertise necessary to meet the applicant's care requirements; or (c) circumstances existed which were provided for in the regulations as being a ground for withholding approval.

Inspector #613 reviewed a Complaint that was received by the Director, identifying that resident #001 had been denied admission to the home.

During an interview with the Complainant, they stated that this particular home had initially accepted resident #001's application and then denied it a few months later. The



Complainant stated they did not understand why resident #001's application was initially accepted then a few months later, they were denied.

A review of resident #001's admission application, revealed that the Complainant had received a letter of acceptance, on behalf of resident #001, from the LTC Home, dated November 2017, and then received another letter dated January 2018, withdrawing the approval for admission. There was no documentation to identify that resident #001 had a reassessment since the licensee had approved their admission to the home.

During an interview with the Executive Director of Care (EDOC), they confirmed that they had initially accepted resident #001 for admission then a few months later withdrew the approval for admission, based on two current residents that resided in the home. The EDOC stated that they had not requested a reassessment of resident #001 to determine if there had been a change or improvement to their status prior to withdrawing their approval for admission.

The application for admission process was not followed whereby the licensee was to review assessments and information and approve the applicant's admission to the home unless circumstances existed which were provided for in the regulations as being a ground for withholding approval, and not based on two other residents currently residing in the home. [s. 44. (7)]

2. The licensee has failed to give the persons described in subsection (10) a written notice setting out (a) the ground or grounds on which the licensee was withholding approval; (b) a detailed explanation of the supporting facts, as they related both to the home and to the applicant's condition and requirements for care; (c) an explanation of how the supporting facts justified the decision to withhold approval; and (d) contact information for the Director, when the licensee withheld approval for admission.

Inspector #613 reviewed a Complaint that was received by the Director, identifying that resident #001 had been denied admission to the home.

During an interview with the Complainant, they stated that this particular home had initially accepted resident #001's application and then denied it a few months later. The Complainant stated they did not understand why resident #001 was initially accepted then a few months later denied.

A review of a letter, dated January 2018, which the Complainant had received on behalf



of resident #001, revealed that the home was withdrawing the approval for admission. The letter identified that the home, “was a Class B home and lacked the appropriate physical facilities necessary to meet resident #001 care needs. The letter did not provide written notice to describe all requirements as per the legislation, specifically (b), (c) and (d) under s. 44 (9).

During an interview with the Executive Director of Care (EDOC), when asked by the Inspector if their letter provided a detailed explanation of the supporting facts, related to the home and the applicant’s condition and requirements for care, the EDOC stated, “that their refusal letter was implying this due to resident #001’s current status we would like to inform you that the applicant would not benefit being admitted to our home. We felt they would get hurt”. The EDOC confirmed that their letter did not provide the confirmation contact number for the Director of the Ministry of Health and Long-Term Care.

Inspector #613 reviewed the most recent refusal letters that the home had sent to resident #004 and resident #005 on two different dates in November 2018, identifying the grounds for admission refusal as the home lacked the physical facilities to meet the care requirement of the resident safely and appropriately. Both refusal letters did not provide the contact information for the Director and the refusal letter to resident #005 did not provide written notice to describe all requirements as per the legislation, specifically (b), (c) and (d) under s. 44 (9).

The application for admission process was not followed whereby the licensee was to provide a written notice to the applicant, the Director and the appropriate placement coordinator setting out (a) the ground or grounds on which the licensee was withholding approval; (b) a detailed explanation of the supporting facts, as they related both to the home and to the applicant’s condition and requirements for care; (c) an explanation of how the supporting facts justified the decision to withhold approval; and (d) contact information for the Director, when the licensee withheld approval for admission. [s. 44. (9)]



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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 to ensure that they review the assessments and information and approve the applicant's admission to the home unless, (a) the home lacks the physical facilities necessary to meet the applicant's care requirements; (b) the staff of the home lacks the nursing expertise necessary to meet the applicant's care requirements; or (c) circumstances existed which were provided for in the regulations as being a ground for withholding approval. As well, to ensure they give the persons described in subsection (10) a written notice setting out (a) the ground or grounds on which the licensee is withholding approval; (b) a detailed explanation of the supporting facts, as they relate both to the home and to the applicant's condition and requirements for care; (c) an explanation of how the supporting facts justify the decision to withhold approval; and (d) contact information for the Director, when the licensee withholds approval for admission., to be implemented voluntarily.

Issued on this 5th day of December, 2018

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

Original report signed by the inspector.