



**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 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**

Central West Service Area Office
500 Weber Street North
WATERLOO ON N2L 4E9
Telephone: (888) 432-7901
Facsimile: (519) 885-9454

Bureau régional de services du
Centre-Ouest
500 rue Weber Nord
WATERLOO ON N2L 4E9
Téléphone: (888) 432-7901
Télécopieur: (519) 885-9454

Amended Public Copy/Copie modifiée du public

Report Date(s)/ Date(s) du Rapport	Inspection No/ No de l'inspection	Log #/ No de registre	Type of Inspection / Genre d'inspection
Dec 28, 2018	2018_448155_0006 (A3)	004446-18	Other

Licensee/Titulaire de permis

Caressant-Care Nursing and Retirement Homes Limited
264 Norwich Avenue WOODSTOCK ON N4S 3V9

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

Caressant Care Fergus Nursing Home
450 Queen Street East FERGUS ON N1M 2Y7

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

Amended by FARAH_ KHAN (695) - (A3)

Amended Inspection Summary/Résumé de l'inspection modifié



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Issued on this 28th day of December, 2018 (A3)

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

Original report signed by the inspector.



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

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Amended Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): January 8-12, 15-19, 22-26, 29-31, March 7-9, 12-15, 19, 21-23, 26-29, April 3-6, 9-10, and 12-13, 2018.

This inspection was done concurrently with the following inspections: Resident Quality Inspection Log #029094-17; Critical Incident system (CIS) Log #002325-18; Log #001151-18; Complaint Log #004889-18; Complaint Log #004608-18: Complaint Log #004224-18 and Other Inspection Log #004504-18 /Inspection #2018_448155_0002.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Nursing, Resident Care Coordinator, Regional Manager/Nurse Consultant, Independent Consultant, Nurse Clerks, Registered Nurses (RN), Registered Practical Nurses (RPN), Personal Support Workers, Resident Council representative, Family council representative, residents and their families.

The inspectors also toured the home, reviewed employee files, meeting minutes, schedules; observed the provision of resident care, resident-staff interactions, and observed the general maintenance and cleanliness of the home.

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



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

1 WN(s)
0 VPC(s)
1 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.) 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.

**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 47.
Qualifications of personal support workers**

Findings/Faits saillants :

1. The licensee failed to ensure that on and after January 1, 2016, every person hired by the licensee as a personal support worker or to provide personal support



services, regardless of title,

(a) had successfully completed a personal support worker program that meet the requirements in subsection (2); and

(b) had provided the licensee with proof of graduation issued by the education provider.

(2) The personal support worker program,

(a) must meet,

(i) the Personal Support Worker Program Standard published by the Ministry of Training, Colleges and Universities dated July 2014, or

(ii) the Personal Support Worker Training Standard published by the Ministry of Training, Colleges and Universities dated October 2014; and

(b) must be a minimum of 600 hours in duration, counting both class time and practical experience time.

The licensee failed to ensure that every person hired by the licensee as a personal support worker or to provide personal support services, regardless of title, was a person who was enrolled in an educational program for registered nurses or registered practical nurses and who, in the opinion of the Director of Nursing and Personal Care, had adequate skills and knowledge to perform the duties of a personal support worker.

A) During the Resident Quality Inspection (RQI) 2018_448155_0001 that started on January 8, 2018 concerns were expressed by residents, family and staff about the skills, English language comprehension and qualifications of several Personal Support Workers (PSWs) that were working in the home.

On an identified date, staff member #115 shared that there had been several PSWs hired. They had a limited knowledge of the English language and their ability to speak/understand English was extremely limited which affected resident care. Staff member #115 shared that these PSWs did not know how to wash residents, make beds, were using brown paper towel instead of toilet paper to wipe residents, talking to each other in their home language and not to residents while providing care and not adhering to fall prevention interventions despite having received training a few days earlier.

On an identified date, Inspector #137 requested the employee files for PSW #116, #125, #138, #141, #144, #145, #147, #149, #150 and #164. Upon review of these files it was noted that PSW #138 and #147 had identical cover letters except for their contact information. PSW #125 and #141 cover letters were identical to that



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of PSW #138 and #147 except for their length of experience and contact information. PSW #125 and #141 resumes were noted to be very similar. PSW #116, #138, and #147 resumes were noted to be very similar. PSW #116, #125, #138, #141, #144, #145, #147 and #164 all were noted to have attended the same educational institution.

A further review of six currently employed PSW employee files was done. The files showed:

- PSW #125 and #141's PSW certificates were dated 19 days after date of hire. There were no official transcripts of records to indicate the number of hours, counting both class time and practical experience time and no references were obtained prior to hiring.
- PSW #138 and #147's PSW certificates were dated four days after date of hire. There were no official transcripts of records to indicate the number of hours, counting both class time and practical experience time.
- PSW #144 had a PSW certificate dated June 2016 and there was not a complete official transcript of records to indicate the number of hours, counting both class time and practical experience time.
- PSW #164's PSW certificate was dated 79 days after date of hire. There was no official transcript of records to indicate the number of hours, counting both class time and practical experience time.

During an interview, Administrator #102 was asked how they knew these PSWs were qualified at the time of hire, Administrator #102 said it was based on the fact that they either had a PSW certificate or their resumes indicated they were nurses in their own country. However, employee files showed that PSW #125, #138, #141, #144, #147 and #164 did not have their PSW certificates at the time of hire. Administrator #102 shared that they had not contacted the education institution to confirm if the individuals did in fact complete the Personal Support Worker program and verify their hours counting both class time and practical experience time.

During an interview with Regional Manager/Nurse Consultant #143 when asked what the expectation was to ensure that employees were qualified before assuming their responsibilities, especially related to international applicants they shared that it would be as outlined in the Long-Term Care Homes Act, 2007.

The licensee failed to ensure that PSW #125, #138, #141, #144, #147, and #164 (a) had successfully completed a personal support worker program that meet the



requirements in subsection (2); and (b) had provided the licensee with proof of graduation issued by the education provider. (2) The personal support worker program, (a) must meet,

(i) the Personal Support Worker Program Standard published by the Ministry of Training, Colleges and Universities dated July 2014, or

(ii) the Personal Support Worker Training Standard published by the Ministry of Training, Colleges and Universities dated October 2014; and

(b) must be a minimum of 600 hours in duration, counting both class time and practical experience time.

B) On an identified date, a further review of a currently employed PSW employee file was done. The file showed:

- PSW #150's date of hire was a specific date but they did not have a PSW certificate. Their resume indicated that they had a Bachelor of Science in Nursing degree from another jurisdiction. The file contained some payment acknowledgement forms for courses at an identified college for the Bridging for Internationally Educated Nurses-Registered Nurses Stream.

During an interview with Administrator #102 when asked how they knew PSW #150 was qualified to work as a personal support worker they stated that it was because PSW #150 was enrolled in nursing courses through an identified college and also based on their resume that they had a Bachelor degree in Nursing from another jurisdiction. Administrator #102 acknowledged that the employee file did not contain any documentation by the Director of Nursing to support that in their opinion that PSW #150 had adequate skills and knowledge to perform the duties of a personal support worker.

The licensee failed to ensure that every person hired by the licensee as a personal support worker or to provide personal support services, was a person who was enrolled in an educational program for registered nurses or registered practical nurses and who, in the opinion of the Director of Nursing and Personal Care, had adequate skills and knowledge to perform the duties of a personal support worker. [s. 47.]

Additional Required Actions:



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

(A3)

The following order(s) have been amended: CO# 001

Issued on this 28th day of December, 2018 (A3)

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

Original report signed by the inspector.



**Ministry of Health and
Long-Term Care**

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

Amended Public Copy/Copie modifiée du public

**Name of Inspector (ID #) /
Nom de l'inspecteur (No) :**

Amended by FARAH_ KHAN (695) - (A3)

**Inspection No. /
No de l'inspection :**

2018_448155_0006 (A3)

**Appeal/Dir# /
Appel/Dir#:**

**Log No. /
No de registre :**

004446-18 (A3)

**Type of Inspection /
Genre d'inspection :**

Other

**Report Date(s) /
Date(s) du Rapport :**

Dec 28, 2018(A3)

**Licensee /
Titulaire de permis :**

Caressant-Care Nursing and Retirement Homes
Limited
264 Norwich Avenue, WOODSTOCK, ON, N4S-3V9

**LTC Home /
Foyer de SLD :**

Caressant Care Fergus Nursing Home
450 Queen Street East, FERGUS, ON, N1M-2Y7

**Name of Administrator /
Nom de l'administratrice
ou de l'administrateur :**

Penny Silva



**Ministry of Health and
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L. O. 2007, chap. 8

To Caressant-Care Nursing and Retirement Homes Limited, 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
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2007, c. 8

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l'article 154 de la *Loi de 2007 sur les
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L. O. 2007, chap. 8

Order # /

Ordre no : 001

Order Type /

Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Pursuant to / Aux termes de :

O.Reg 79/10, s. 47. Qualifications of personal support workers

Order / Ordre :

The licensee must be compliant with O.Reg. 79/10, s. 47.(1), (2), and (3)(c).

Specifically the licensee must:

- a) Ensure that personal support worker #125, #138, #141, #144, #147, #164 and all personal support workers hired after January 1, 2016 have successfully completed a personal support worker program that meets the requirements in subsection (2).
- b) Verify that personal support worker #125, #138, #141, #144, #147, #164 and all personal support workers hired after January 1, 2016 have completed a personal support worker program that is a minimum of 600 hours in duration, counting both class time and practical experience time and keep records supporting the completion of the hours in the employee's file.
- c) Ensure that personal support worker #125, #138, #141, #144, #147, #164 and all personal support workers hired after January 1, 2016 have provided the licensee with proof of graduation issued by the education provider.
- d) Have documentation in the employee file for PSW #150 that verifies that they are currently enrolled in an educational program for registered nurses or registered practical nurses and that in the opinion of the Director of Nursing and Personal Care that the employee has adequate skills and knowledge to perform the duties of a personal support worker.
- e) Ensure that if hiring a person who is enrolled in an educational program for registered nurses or registered practical nurses as a personal support worker they must have documentation in the employee file at the time of hire that the person is enrolled in an education program for registered nurses or registered practical nurses and that in the opinion of the Director of Nursing and Personal Care that the employee has adequate skills and knowledge to perform the duties of a personal support worker.

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l'article 154 de la *Loi de 2007 sur les
foyers de soins de longue durée*,
L. O. 2007, chap. 8

Grounds / Motifs :

1. A) During the Resident Quality Inspection (RQI) 2018_448155_0001 that started on January 8, 2018 concerns were expressed by residents, family and staff about the skills, English language comprehension and qualifications of several Personal Support Workers (PSWs) that were working in the home.

On an identified date, staff member #115 shared that there had been several PSWs hired. They had a limited knowledge of the English language and their ability to speak/understand English was extremely limited which affected resident care. Staff member #115 shared that these PSWs did not know how to wash residents, make beds, were using brown paper towel instead of toilet paper to wipe residents, talking to each other in their home language and not to residents while providing care and not adhering to fall prevention interventions despite having received training a few days earlier.

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During an interview, Administrator #102 was asked how they knew these PSWs were qualified at the time of hire, Administrator #102 said it was based on the fact that they either had a PSW certificate or their resumes indicated they were nurses in their own country. However, employee files showed that PSW #125, #138, #141, #144, #147 and #164 did not have their PSW certificates at the time of hire. Administrator #102 shared that they had not contacted the education institution to confirm if the individuals did in fact complete the Personal Support Worker program and verify their hours counting both class time and practical experience time.

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The licensee failed to ensure that every person hired by the licensee as a personal support worker or to provide personal support services, was a person who was enrolled in an educational program for registered nurses or registered practical nurses and who, in the opinion of the Director of Nursing and Personal Care, had adequate skills and knowledge to perform the duties of a personal support worker.

The severity of this issue was determined to be a level 2 as there was potential for actual harm. The scope of the issue was a level 3 as it related to seven of ten personal support workers reviewed. The home had a level 2 history of one or more unrelated non-compliances in the last 36 months. (155)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Mar 31, 2019(A3)



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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 Health and 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:



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section 154 of the *Long-Term
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2007, c. 8

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 Health and 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.



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2007, c. 8

Ordre(s) de l'inspecteur

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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 de la Santé et des Soins de longue durée
1075, rue Bay, 11^e étage
Toronto ON M5S 2B1
Télécopieur : 416-327-7603



**Ministry of Health and
Long-Term Care**

**Ministère de la Santé et des
Soins de longue durée**

Order(s) of the Inspector

Ordre(s) de l'inspecteur

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

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
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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.hsarb.on.ca.

Issued on this 28th day of December, 2018 (A3)

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

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

Amended by FARAH_ KHAN (695) - (A3)



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Service Area Office /

Central West Service Area Office

Bureau régional de services :