



**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 sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**Health System Accountability and  
Performance Division  
Performance Improvement and  
Compliance Branch**

**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
performance et de la conformité**

**London Service Area Office  
130 Dufferin Avenue, 4<sup>th</sup> Floor  
London, ON, N6A 5R2  
Telephone: (519) 873-1200  
Facsimile: (519) 873-1300**

**Bureau régional de services de London  
130, avenue Dufferin, 4e étage  
London, ON, N6A 5R2  
Téléphone: (519) 873-1200  
Télécopieur: (519) 873-1300**

**Public Copy/Copie du public**

| <b>Report Date(s) /<br/>Date(s) du Rapport</b> | <b>Inspection No /<br/>No de l'inspection</b> | <b>Log # /<br/>Registre no</b> | <b>Type of Inspection /<br/>Genre d'inspection</b> |
|--|---|--------------------------------|--|
| May 16, 2014                                   | 2014_183135_0030                              | L-000328-14                    | Complaint  |

**Licensee/Titulaire de permis**

CORPORATION OF THE COUNTY OF HURON  
77722A London Rd, R R 5, CLINTON, ON, N0M-1L0

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

HURONVIEW HOME FOR THE AGED  
R. R. #5, LOT 50, CON 1, MUNICIPALITY OF HURON EAST, CLINTON, ON,  
N0M-1L0

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

BONNIE MACDONALD (135)

**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): May 6, 2014.**

**During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care, Assistant Director of Care, Business Office Manager, Lead Hand Maintenance, 4 Personal Support Workers, 2 Health Care Aides and Resident.**

**During the course of the inspection, the inspector(s) reviewed resident clinical records and policy and procedures for the alarm system. Observed resident care and services provided in resident home areas.**

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



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**Reporting and Complaints  
Safe and Secure Home**

**Findings of Non-Compliance were found during this inspection.**

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

| Legend  | Legendé   |
|---|---|
| WN – Written Notification<br>VPC – Voluntary Plan of Correction<br>DR – Director Referral<br>CO – Compliance Order<br>WAO – Work and Activity Order   | WN – Avis écrit<br>VPC – Plan de redressement volontaire<br>DR – Aiguillage au directeur<br>CO – Ordre de conformité<br>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.   |



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**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 5.  
Every licensee of a long-term care home shall ensure that the home is a safe  
and secure environment for its residents. 2007, c. 8, s. 5.**

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**Findings/Faits saillants :**

1. The Licensee failed to ensure that the home was a safe and secure environment for its residents when the following occurred:

Resident #01 was found wandering outside the home.

During the homes' investigation it was determined the resident had exited through an alarmed door.

Interviews with staff verified, some staff members had conducted a search for their residents, while other staff had not.

During an interview with Registered staff member, she verified that once staff check to see that all their residents are accounted for there is no process in place to ensure that all staff have reported back to registered staff that their residents are safe.

The Director of Care provided staff with a "Read and Sign" education package on the procedure changes made to alarm system. As of May 7, 2014, 25 staff (26.6%) had not read and signed the education package.

During an interview the Administrator confirmed that resident was not kept secure and it was her expectation that the home is a safe and secure environment for its residents. [s. 5.]

***Additional Required Actions:***

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

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soins de longue durée**

Issued on this 16th day of May, 2014

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

*Bonnie MacDonald*



**Ministry of Health and  
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

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**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 System Accountability and Performance Division  
Performance Improvement and Compliance Branch**

**Division de la responsabilisation et de la performance du système de santé  
Direction de l'amélioration de la performance et de la conformité**

**Public Copy/Copie du public**

**Name of Inspector (ID #) /**

**Nom de l'inspecteur (No) :** BONNIE MACDONALD (135)

**Inspection No. /**

**No de l'inspection :** 2014\_183135\_0030

**Log No. /**

**Registre no:** L-000328-14

**Type of Inspection /**

**Genre**

Complaint

**d'inspection:**

**Report Date(s) /**

**Date(s) du Rapport :** May 16, 2014

**Licensee /**

**Titulaire de permis :**

CORPORATION OF THE COUNTY OF HURON  
77722A London Rd, R R 5, CLINTON, ON, N0M-1L0

**LTC Home /**

**Foyer de SLD :**

HURONVIEW HOME FOR THE AGED  
R. R. #5, LOT 50, CON 1, MUNICIPALITY OF HURON  
EAST, CLINTON, ON, N0M-1L0

**Name of Administrator /**

**Nom de l'administratrice**

**ou de l'administrateur :**

*Connie Townsend*  
~~BARB SPRINGALL~~

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To CORPORATION OF THE COUNTY OF HURON, you are hereby required to  
comply with the following order(s) by the date(s) set out below:



**Ministry of Health and  
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

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**Order # /  
Ordre no :** 001

**Order Type /  
Genre d'ordre :** Compliance Orders, s. 153. (1) (b)

**Pursuant to / Aux termes de :**

LTCHA, 2007 S.O. 2007, c.8, s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents. 2007, c. 8, s. 5.

**Order / Ordre :**

The Licensee must prepare, submit and implement a plan for achieving compliance with LTCHA, 2007 S.O. 2007, c.8,s. 5. that includes:

1. Plan to include the following when the security system alarms and resident may have exited the home:

- An immediate review of the alarm system's policy and procedure to mitigate the risk of resident elopement.
- What are the responsibilities of the Registered and Non Registered staff when system alarms.
- What processes will be implemented to ensure all residents are safe and accounted for, when the system alarms.
- A summary of how and when staff will be trained and oriented to their responsibilities as part of the policy and procedure for the alarm system.
- How the home will educate visitors/others about residents who are at risk of elopement and any steps visitors/others can take to ensure resident safety.
- How will the home audit the process to ensure ongoing resident safety with the use of the alarm system.
- A copy of the new/finalized alarm system policy and procedure must be sent to the Ministry of Health and Long Term Care.



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3. Determine what immediate interventions will be implemented, while the system is being upgraded, to mitigate the risk to the residents.
4. The plan must include confirmation with dates of when the policy will be revised and expected completion date for staff and visitor training/education.

Please submit the plan in writing, to Bonnie MacDonald Long-Term Care Homes Inspector, Ministry of Health and Long Term Care Performance Improvement and Compliance Branch, 130 Dufferin Avenue 4th Floor London Ontario N6A 5R2, or by email [bonnie.macdonald @ontario.ca](mailto:bonnie.macdonald@ontario.ca) by June 6, 2014 .

**Grounds / Motifs :**



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1. The Licensee failed to ensure that the home was a safe and secure environment for its residents when the following occurred:  
Resident #01 was found wandering outside the home .

During the home's investigation it was determined the resident had exited through an alarmed door.

Interviews with staff verified some staff members had conducted a search for their residents when the alarm sounded, while other staff had not.

During an interview with the Registered staff member, she verified that once staff check to see that all their residents are accounted for there is no process in place to ensure that all staff have reported back to registered staff.

Following the incident, the Director of Care provided staff with a "Read and Sign" education package on the procedure changes made to the Security System. As of May 7, 2014, 25 staff (26.6%) had not read and signed the Security System education package.

During an interview the Administrator confirmed that resident was not safe and secure when they exited the building and it was her expectation that the home is a safe and secure environment for its residents.

(135)

**This order must be complied with /**

**Vous devez vous conformer à cet ordre d'ici le : Jul 04, 2014**



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section 154 of the *Long-Term Care  
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de l'article 154 de la *Loi de 2007 sur les foyers  
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**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 or by fax upon:

Director  
c/o Appeals Coordinator  
Performance Improvement and Compliance Branch  
Ministry of Health and Long-Term Care  
1075 Bay Street, 11th Floor  
TORONTO, ON  
M5S-2B1  
Fax: 416-327-7603



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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing 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:

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

Attention Registrar  
151 Bloor Street West  
9th Floor  
Toronto, ON M5S 2T5

Director  
c/o Appeals Coordinator  
Performance Improvement and Compliance  
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](http://www.hsarb.on.ca).



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**RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL**

**PRENDRE AVIS**

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

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

La demande de réexamen doit contenir ce qui suit :

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

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur  
a/s Coordinateur des appels  
Direction de l'amélioration de la performance et de la conformité  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11e étage  
Ontario, ON  
M5S-2B1  
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



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En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire  
Commission d'appel et de révision  
des services de santé  
151, rue Bloor Ouest, 9e étage  
Toronto (Ontario) M5S 2T5

Directeur  
a/s Coordinateur des appels  
Direction de l'amélioration de la performance et de la  
conformité  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11e étage  
Ontario, ON  
M5S-2B1  
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au [www.hsarbo.ca](http://www.hsarbo.ca).

**Issued on this 16th day of May, 2014**

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

A handwritten signature in black ink that reads "Bonnie MacDonald".

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

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