

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

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

Report Date(s) / Date(s) du apport

Inspection No / No de l'inspection Loa #/ No de registre

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

Jun 25, 2018

2018 737640 0015 010972-18

Complaint

Licensee/Titulaire de permis

Extendicare (Canada) Inc. 3000 Steeles Avenue East Suite 103 MARKHAM ON L3R 4T9

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

Extendicare Halton Hills 9 Lindsay Court Georgetown ON L7G 6G9

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs **HEATHER PRESTON (640)**

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): May 28, 2018

This inspection was conducted as an off-site inspection.

The purpose of the inspection was to conduct a complaint inspection related to;

Log #010972-18 regarding refusal to approve an applicant for admission

During the course of the inspection, the inspector(s) spoke with Complainant, Mississauga Halton Local Health Integration Network, Social Worker and the Administrator.

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)



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| NON-COMPLIANCE / NON - RESPECT DES EXIGENCES | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Legend | Legendé |
| 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



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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).

Findings/Faits saillants:

- 1. The licensee failed to take into account the assessments and information under subsection 43 (6), and approve an 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 lack the nursing expertise necessary to meet the applicants care requirements; or
- c) circumstances exist which were provided for in the regulations as being a ground for withholding approval.

As a result of the complaint inspection related to refusal to approve applicant #001's admission, the Long-Term Care Home (LTCH) Inspector requested a copy of the home's refusal to admit letter sent to the applicant.

The Administrator provided a copy of the letter of refusal to approve the applicant for admission to the LTCH Inspector.

Applicant #001 had been deemed eligible for admission to long-term care by a Placement Coordinator at the Mississauga Halton Local Health Integration Network in November 2016, and had applied to Extendicare Halton Hills for admission at that time.

According to the complainant, the applicant did exhibit responsive behaviour and other



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medical conditions.

On December 19, 2017, the home sent a letter of "refusal to accept for placement" to the applicant, stating "the home could not provide the one to one staffing they believed the applicant required.

During an interview with the Social Worker (SW), the home's manager of applications, the LTCH Inspector confirmed the contents of the letter to the applicant and the SW informed the LTCH Inspector that the home could not provide that level of staffing.

The LTCH Inspector reviewed with the SW that the home had access to High Intensity Needs (HIN) funding from the Ministry of Health and Long Term Care (MOHLTC) wherein funds could be made available for staffing needs related to the care of the applicant.

The LTCH Inspector reviewed the letter and the requirements with the Administrator who acknowledged the home did not have sufficient evidence to validate the legislative rationale for the refusal to approve applicant #001 admission to the home. [s. 44. (7) (b)]

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 the licensee must take into account the assessments and information

under subsection 43 (6), and approve an 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 lack the nursing expertise necessary to meet the applicants care requirements; or
- c) circumstances exist which were provided for in the regulations as being a ground for withholding approval, to be implemented voluntarily.



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Issued on this 3rd day of July, 2018

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

Original report signed by the inspector.