

Ministry of Long-Term Care

Long-Term Care Operations Division
Long-Term Care Inspections Branch

Hamilton District

119 King Street West, 11th Floor
Hamilton, ON, L8P 4Y7
Telephone: (800) 461-7137

Original Public Report

Report Issue Date: June 14, 2024	
Inspection Number: 2024-1318-0002	
Inspection Type: Critical Incident	
Licensee: Regency LTC Operating Limited Partnership, by its general partners, Regency Operator GP Inc. and AgeCare Iris Management Ltd.	
Long Term Care Home and City: AgeCare Wenleigh, Mississauga	
Lead Inspector Tracey Delisle (741863)	Inspector Digital Signature
Additional Inspector(s)	

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): May 15 - 17, 21, 23 - 24, 2024
The inspection occurred offsite on the following date(s): May 22, 2024

The following intake(s) were inspected:

- Intake: #00108114 - Related to: Falls Prevention and Management Program.

The following intake(s) were reviewed:

- Intake: #00103385 - Related to: Falls Prevention and Management Program.
- Intake: #00115087 - Related to: Falls Prevention and Management Program.

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

Infection Prevention and Control
Falls Prevention and Management

INSPECTION RESULTS

COMPLIANCE ORDER CO #001 Plan of care

NC #001 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: FLTCA, 2021, s. 6 (7)

Plan of care

s. 6 (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:

The Licensee shall:

1. Ensure the staff are following the plan of care as it relates to assisting with resident care needs according to the care plan.

Grounds

The licensee failed to follow the plan of care while providing care to the resident.

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Rationale and Summary

On an identified day, Staff was providing care to a resident when resident sustained and injury. The Resident's care plan for personal care at the time was not followed.

According to the documentation and interviews with staff, the resident was sent to hospital and sustained injuries due to the care plan not being followed.

Failure to follow the care plan, put resident at risk and subsequently sustained significant injuries.

Sources: Resident's clinical records, Critical Incident, Homes investigation notes, interview with staff. [741863]

This order must be complied with by June 27, 2024

**ORDER CO #002 Transferring and positioning techniques
COMPLIANCE**

NC #002 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 40

Transferring and positioning techniques

s. 40. Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents.

**The inspector is ordering the licensee to comply with a Compliance Order
[FLTCA, 2021, s. 155 (1) (a)]:**

The Licensee shall:

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1. Retrain in person specified Staff on Safe Lift and Transfer Policies and the Home's Fall Prevention Policy.
2. Document the education provided, including the names of the staff in attendance, date, and duration of the training, and who provided the education.
3. Keep a record of the training materials used and the date all education was completed for inspector review.

Grounds

The licensee failed to ensure that staff used safe transferring and positioning devices or techniques when transferring a resident.

Specifically, the staff did not comply with the Resident Falls Prevention Policy to ensure safe transferring techniques were followed when transferring a resident.

Rationale and Summary

On a specified day, a resident had a fall, and it was confirmed in the interviews with Staff that the staff did not follow safe lift and transfer techniques as outlined in the Resident Falls Prevention Policy.

Failure to properly lift and transfer resident put resident at risk for further injury.

Sources: Staff interviews, Resident clinical records, Critical Incident, Home's Investigation Notes, Policy, Resident Falls Prevention under Resident Safety and Risk Management. [741863]

This order must be complied with by July 25, 2024

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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/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). 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 or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th floor
Toronto, ON, M7A 1N3

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e-mail: MLTC.AppealsCoordinator@ontario.ca

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

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 an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

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Health Services Appeal and Review Board

Attention Registrar
151 Bloor Street West, 9th Floor
Toronto, ON, M5S 1S4

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th Floor
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Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website www.hsarb.on.ca.