

Health System Accountability and  
Performance Division  
Performance Improvement and  
Compliance Branch  
Toronto Service Area Office

55 St. Clair Avenue West, 8<sup>th</sup> Floor  
Toronto ON M4V 2Y7  
Telephone: (416) 212-0934  
Fax: (416) 327-4486

Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la performance  
et de la conformité  
Bureau régional de services de Toronto

55, avenue St. Clair ouest, 8<sup>e</sup> étage  
Toronto ON M4V 2Y7  
Téléphone : (416) 212-0934  
Télécopieur : (416) 327-4486

Remote Offices:  
Performance Improvement and Compliance Branch

3rd Floor  
465 Davis Drive  
Newmarket ON L3Y 8T2 1-800-486-4935  
Fax : 1-905-954-4702

34 Simcoe Street  
Barrie ON L4N 6T4 Fax : 1-705-739-6473

June 3, 2008

Ms. Stella Ng  
Administrator  
Mon Sheong Richmond Hill Long Term Care Centre  
11199 Yonge Street  
Richmond Hill ON L4S 1L2

Dear Ms. Ng:

Please find enclosed the Facility Review Summary Report for the review of care and services conducted on **April 3, 4, 7, 8, 9 & 10, 2008.**

This **Annual** report must be posted for public viewing in a conspicuous place in your Nursing Home, in accordance with Section 123(a) of the Nursing Homes Act and Regulation 832.

I would like to remind you that under the Freedom of Information and Protection of Privacy Act, all information retained by the Ministry of Health and Long-Term Care relating to your home is subject to public release.

A copy of the report must be available without charge to any resident of the home upon request. The report will also be on file with the Health System Accountability and Performance Division, Performance Improvement and Compliance Branch, Toronto Service Area Office.

Thank you for your co-operation.

Yours truly,

  
Vilma Kalu, R.N.  
Compliance Advisor

Encl

c: Legislative Library  
Concerned Friends  
OLTCA

OANHSS  
CCAC  
Compliance Advisor



Ministry  
of Health and  
Long-Term  
Care

Ministère  
de la Santé et  
des Soins de  
longue durée

Health System Accountability and  
Performance Division

Division de la responsabilisation et de  
la performance du système de santé

## Facility Review Report

## Rapport d'inspection d'établissement

---

Long-Term Care Facility/Établissement de soins de longue durée

**Mon Sheong Richmond Hill Long Term Care Centre**  
**11199 Yonge Street**  
**Richmond Hill ON L4S 1L2**

---

Governing body/Organisme responsable

**Mon Sheong Foundation**

---

Administrator/Directeur général/directrice général

**Ms. Stella Ng**

---

Approved capacity/Nombre de lits autorisés

**192**

---

Type of review/Genre d'inspection

Review date/Date de l'inspection

**Annual report - April 3, 4, 7, 8, 9 & 10, 2008**

## Facility Review Report

The mandate of the Ministry of Health and Long-Term Care is to ensure that residents in Ontario Long-Term Care Facilities receive quality care and services.

In order to achieve this goal, the Ministry has implemented its **Long-Term Care Facility Review Program** to monitor the quality of resident care and facilities services. Where Long-Term Care Facilities do not meet Ministry standards, as determined by facility reviews, the home is expected to correct any unmet standards or criteria.

The Health System Accountability and Performance Division of the Ministry of Health and Long-Term Care conducts ongoing quality of care reviews in all Long-Term Care Facilities throughout the Province of Ontario.

The **Report of Unmet Standards or Criteria** outlines the Ministry's review findings and the facility's review plan for corrective action. Reports are public documents and must be prominently displayed in all Long-Term Care facilities.

Any inquiries related to this program may be directed to:

Manager  
Ministry of Health and Long-Term Care  
Health System Accountability and  
Performance Division  
Performance Improvement and Compliance  
Branch  
Toronto Service Area Office  
55 St. Clair Ave, West, 8<sup>th</sup> Floor  
Toronto ON M4V 2Y7  
Telephone: (416) 212-0934  
Facsimile: (416) 327-4486

## Rapport d'inspection d'établissement

Le mandat du Ministère de la Santé et des Soins de longue durée est d'assurer aux pensionnaires des établissements de soins de longue durée de l'Ontario des soins et des services de qualité.

Afin d'atteindre cet objectif, le ministère a mis en oeuvre son **Programme d'inspections des établissements de soins de longue durée** pour surveiller la qualité des soins dispensés aux pensionnaires et des services offerts dans les établissements de soins de longue durée. Si, selon les inspections, les établissements de soins de longue durée ne se conforment pas aux normes établies par le ministère, ceux-ci deviennent donc responsables pur la correction des normes et critères non-respectés.

La Division de la responsabilisation et de la performance du système de santé du Ministère de la santé et des Soins de longue durée effectue régulièrement des inspections sur la qualité des soins dans toutes les établissements de soins de longue durée.

Le **Rapport sur les cas de non-conformité aux normes et aux critères** donne les résultats de l'inspection du ministère et le plan de l'établissement de soins de longue durée en ce qui a trait aux mesures correctives à prendre. Ce rapport est un document public et doit être affiché bien en vue dans l'établissement de soins de longue durée.

Pour de plus amples renseignements sur ce programme, écrivez à la personne suivante:

Directrice  
Ministère de la Santé et des Soins de longue  
durée  
Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la performance  
et de la conformité  
Bureau régional de services de Toronto  
55, avenue St. Clair ouest, 8<sup>e</sup> étage  
Toronto ON M4V 2Y7  
Téléphone: (416) 212-0934  
Télécopier: (416) 327-4486

## ***FACILITY REVIEW SUMMARY REPORT***

### ***Definition of Terms***

The monitoring and evaluation process is based on the standards and criteria contained in the Long Term Care Facilities Program Manual. Each facility has a copy which the public may request to view.

The reviewer considers the following factors in concluding that a standard or criteria has not been met:

- Conditions have been observed that pose actual or potential serious risks to a resident's health, welfare or rights; and/or
- Conditions have been observed that are not as serious but are prevalent or recurring; and/or
- The facility has not made successful efforts to initiate corrective action; and/or
- Conditions have been identified during previous reviews, but have not been corrected within the negotiated time frame for corrective action.

| <b><i>STANDARD MET</i></b>                                                                                                                                                                                                                                                                                                                                         | <b><i>STANDARD NOT MET</i></b>                                                                                                                                                                                                                                                                                                                                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| All criteria that were reviewed relating to the identified standard were found to meet the expectations.                                                                                                                                                                                                                                                           | One or more criteria that were reviewed relating to the identified standards, did not meet the expectations; and<br><br>The identified deficiencies met the conditions for issuing a REPORT OF UNMET STANDARDS OR CRITERIA or AREA OF NON-COMPLIANCE.                                                                                                             |
| <b><i>RECOMMENDATION(S) DISCUSSED</i></b>                                                                                                                                                                                                                                                                                                                          | <b><i>REFERRAL MADE TO<br/>(appropriate discipline/specialty)</i></b>                                                                                                                                                                                                                                                                                             |
| Criteria that were reviewed relating to the identified standard may or may not meet the expectations; but <b><i>identified deficiencies if applicable, do not meet the conditions for issuing a REPORT OF UNMET STANDARDS OR CRITERIA. Recommendations were discussed to enhance the quality of the care, programs and services provided to the residents.</i></b> | <b><i>Criteria reviewed relating to the identified standard may or may not meet the expectations.</i></b><br><br><b><i>Criteria that were reviewed indicate the need for other expertise to determine compliance or to provide more in-depth review and assistance.</i></b><br><br><b><i>A REPORT OF UNMET STANDARD OR CRITERIA may or may not be issued.</i></b> |

## HOME REVIEW SUMMARY REPORT

**Long-Term Care Home:** Mon Sheong Richmond Hill

**Date of Review:** April 3, 4, 7, 8, 9 & 10, 2008

**Type of Review:** Annual Review

**Updates on any care, programs and services being provided by the home:**

All or some criteria related to the following standards were reviewed. Comments in the right column reflect the status of the standards at the time of the review AND ARE BASED ONLY ON CRITERIA WHICH WERE REVIEWED. Conclusions are based on observations and reviews of a selected sample of residents.

| STANDARD                                                                                                                                                                                                                                                                    | COMMENTS                                                                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| <b>Resident Safeguards</b>                                                                                                                                                                                                                                                  |                                                                                                        |
| There are mechanisms in place to promote and support residents' rights, autonomy, and decision-making.                                                                                                                                                                      | Standard Met<br>Residents' Council is actively involved in the care and services provided in the home. |
| There is a home-specific written admission agreement in place to delineate the accommodation, care, services, programs and goods that will be provided to the resident and, the obligations of the resident with respect to their responsibilities and payment for service. | Standard Met                                                                                           |
| <b>Resident Care and Services</b>                                                                                                                                                                                                                                           |                                                                                                        |
| Each resident's needs for care and services are determined with the resident/representative through an interdisciplinary assessment process.                                                                                                                                | Standard Met                                                                                           |

|                                                                                                                                                                                                   |                                                                                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Each resident's care and services are planned with the resident/representative through an inter-disciplinary planning process.                                                                    | Standard Met                                                                                                                                  |
| Each resident receives care and services consistent with his/her plan of care and with residents' rights outlined in the Bill of Rights.                                                          | Standard Met<br>Discussion held related to restraints.                                                                                        |
| There is ongoing monitoring and evaluation of each resident's care, services and care outcomes.                                                                                                   | Standard Met                                                                                                                                  |
| All significant information about each resident is documented in his/her record.                                                                                                                  | Standard Met<br>Discussion held related to: <ul style="list-style-type: none"> <li>• Documentation</li> <li>• Resident care plans.</li> </ul> |
| Nursing Services                                                                                                                                                                                  |                                                                                                                                               |
| There is an organized program of nursing services to meet residents' nursing and personal care needs, consistent with the professional standards of practice of the College of Nurses of Ontario. | Standard Met                                                                                                                                  |
| Staff Education                                                                                                                                                                                   |                                                                                                                                               |
| There is an organized orientation program that responds to the learning needs of new staff.                                                                                                       | Standard Met                                                                                                                                  |
| There is an organized in-service education program that responds to the assessed learning needs of staff.                                                                                         | Standard Met<br>Extensive in-service education is provided and ongoing professional development opportunities are available for all staff.    |
| Recreation and Leisure Services                                                                                                                                                                   |                                                                                                                                               |
| There are recreation and leisure services organized to provide age-appropriate recreation, leisure, and education                                                                                 | Standard Met                                                                                                                                  |

|                                                                                                                                                                 |                                                                                                                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| opportunities based on and responsive to the abilities, strengths, needs, interests and former lifestyle of the residents.                                      |                                                                                                                          |
| <b>Social Work Services</b>                                                                                                                                     |                                                                                                                          |
| There is an organized program of social work services, or arrangements are made to access available social work services to meet residents' psychosocial needs. | <b>Standard Met</b><br>A full time social worker is on site to provide assistance and support to residents and families. |
| <b>Spiritual and Religious Program</b>                                                                                                                          |                                                                                                                          |
| There is an organized spiritual and religious care program to respond to the spiritual and religious needs and interests of the residents.                      | <b>Standard Met</b>                                                                                                      |
| <b>Therapy Services</b>                                                                                                                                         |                                                                                                                          |
| There is an organized program of therapy services or arrangements made to access available therapy services to meet residents' identified therapy needs.        | <b>Standard Met</b><br>Physiotherapy is provided on site 5 days per week.                                                |
| <b>Volunteer Services</b>                                                                                                                                       |                                                                                                                          |
| There is an organized program of volunteer services.                                                                                                            | <b>Standard Met</b><br>Committed volunteers are dedicated to enhancing the care and services provided to the residents.  |
| <b>Dental Services</b>                                                                                                                                          |                                                                                                                          |
| There is a co-ordinated program of dental services, or arrangements made to access dental services to meet residents' dental care needs.                        | <b>Standard Met</b>                                                                                                      |
| <b>Foot Care Services</b>                                                                                                                                       |                                                                                                                          |
| There is an organized program of foot care services, or arrangements are made to                                                                                | <b>Standard Met</b>                                                                                                      |

|                                                                                                                                                                                                                  |                                                                              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| access foot care services to meet residents' needs.                                                                                                                                                              |                                                                              |
| <b>Other Approved Programs</b>                                                                                                                                                                                   |                                                                              |
| Other programs/services provided by the home are organized to provide services to respond to residents' identified needs/preferences.                                                                            | <b>Standard Met</b>                                                          |
| <b>Home Organization and Administration</b>                                                                                                                                                                      |                                                                              |
| The program and resources of the home are organized to effectively manage the home and each of its programs and services, in keeping with Ministry Acts Regulations, Policies and Directives.                    | <b>Standard Met</b>                                                          |
| There is a comprehensive, co-ordinated, home-wide, program for monitoring, evaluating and improving the quality of accommodation, care, services, programs and goods provided by the home.                       | <b>Standard Met</b><br>Resident centre care is evidenced.                    |
| There are co-ordinated risk management activities designed to reduce and control actual or potential risks to the safety, security, welfare and health of individuals or to the safety and security of the home. | <b>Standard Met</b>                                                          |
| There is an organized system of records management which includes the components of collection, access, storage, retention and destruction of records.                                                           | <b>Standard Met</b>                                                          |
| <b>Medical Services</b>                                                                                                                                                                                          |                                                                              |
| Medical services are organized to meet residents' medical needs, including assessment, planning and provision of residents' individualized medical care, consistent with professional standards of practice.     | <b>Standard Met</b><br>Dedicated physicians provide a team approach to care. |

| <b>Environmental Services</b>                                                                                                                                               |              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| Environmental services are organized to provide a safe, comfortable, clean, well-maintained environment for residents, staff and visitors.                                  | Standard Met |
| The home, including furnishings and equipment, is maintained.                                                                                                               | Standard Met |
| The home, including furnishings and equipment, is kept clean.                                                                                                               | Standard Met |
| Laundry services are organized to meet the linen and personal clothing needs of residents.                                                                                  | Standard Met |
| <b>Dietary Services</b>                                                                                                                                                     |              |
| There is an organized program of dietary services to respond to residents' nutritional care needs and to provide safe, personally acceptable, nutritious food to residents. | Standard Met |
| <b>Diagnostic Services</b>                                                                                                                                                  |              |
| The home makes arrangements for diagnostic services to meet residents' needs as ordered by the residents' physicians.                                                       | Standard Met |
| <b>Pharmacy Services</b>                                                                                                                                                    |              |
| There is an organized program for the provision of pharmacy services to meet the residents' identified needs.                                                               | Standard Met |
| There is an organized interdisciplinary pharmacy and therapeutics committee responsible for directing the home's pharmacy program and services.                             | Standard Met |

|                                                                                                                                                                                                                           |              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| The prescription ordering and transmission of orders support the safe provision of drugs to residents.                                                                                                                    | Standard Met |
| The pharmacy service provides for the accurate, safe dispensing of prescription drugs and biologicals to meet residents' identified medication requirements.                                                              | Standard Met |
| A system of records for receipt and disposition of all drugs received by the home is maintained in sufficient detail to enable accurate tracking, reconciliation and auditing, in accordance with applicable legislation. | Standard Met |
| All drugs and biologicals are stored under proper conditions of sanitation, temperature, light, humidity and security.                                                                                                    | Standard Met |
| Disposal of drugs is in accordance with established Ministry policy.                                                                                                                                                      | Standard Met |
| There is a system for immediate reporting of each medication error and adverse drug reaction, with specific follow-up action to be taken.                                                                                 | Standard Met |

Home: 2897 /Visit: 1

| <i>Home</i>                                   | <i>Name And Address</i>                                      | <i>Type of Review</i>                      | <i>Discipline</i>                             | <i>Inspection Date</i>                    | <i>Page #</i>            |
|-----------------------------------------------|--------------------------------------------------------------|--------------------------------------------|-----------------------------------------------|-------------------------------------------|--------------------------|
| 2897                                          | MON SHEONG RICHMOND HILL LONG TERM CAR<br>11199 YONGE STREET | Annual                                     | Nursing                                       | 2008/04/03                                | 1 of 1                   |
|                                               | RICHMOND HILL ON L4S 1L2                                     |                                            |                                               | <i>Number of Days</i><br>6                |                          |
| <i>Act/Reg<br/>Standards<br/>And Criteria</i> | <i>Ministry Inspection Results</i>                           | <i>Required<br/>Date of<br/>Correction</i> | <i>LTC Facility Plan of Corrective Action</i> | <i>Planned<br/>Date of<br/>Correction</i> | <i>Ministry Response</i> |

N/A No unmet standards of criteria issued during the 2008 Annual Review