Ministry of Health and Long-Term Care

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

347 Preston St., 4th Floor
Ottawa ON K1S 3J4
Telephone: 613-569-5602
Facsimile: 613-569-9670

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 Ottawa

347, rue Preston, 4iém étage
Ottawa ON K1S 3J4
Téléphone: 613-569-5602
Télécopieur: 613-569-9670

Ontario

February 24, 2011

Ms. Michelle Rose
Administrator
Regency Manor Nursing Home
66 Dorset Street, East
Port Hope ON L1A 1E3

Dear Ms. Rose:

Please find enclosed the ***Inspection Report-Public Copy*** for an inspection conducted on January 12 and 13, 2011 under the *Long-Term Care Homes Act, 2007* (LTCHA) for the purpose of ensuring compliance with requirements under the LTCHA.

This inspection report must be posted in the home, in a conspicuous and easily accessible location in accordance with the LTCHA, 2007, S.O. 2007, c.8, s.79 (1) and (2).

A copy of the ***Inspection Report-Public Copy*** must be made available without charge upon request. The report will also be on file with the Ottawa Service Area Office, Performance Improvement and Compliance Branch.

Sincerely

Kathleen Snid

for Caroline Tompkins
LTC Home Inspector – Nurse

c President, Resident's Council
President, Family Council

Ontario

Inspection Report under the *Long-Term Care Homes Act, 2007*

Rapport d'inspection prévue le *Loi de 2007 les foyers de soins de longue durée*

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☐ **Licensee Copy/Copie du Titulaire** ☒ **Public Copy/Copie Public**

Date(s) of inspection/Date de l'inspection	**Inspection No/ d'inspection**	**Type of Inspection/Genre d'inspection**
January 12, January 13 2011	2011_166_2511_12Jan130035	O-003035 Critical Incident

Licensee/Titulaire
Provincial Nursing Homes Limited Partnership Fax 519-966-3002
1090 Morand Street,
Windsor,ON
N9G 1J6

Long-Term Care Home/Foyer de soins de longue durée
Regency Manor Nursing Home, Division of Provincial Nursing Homes Limited Partnership
66 Dorset Street,
Port Hope, ON Fax 905-885-7386
L1A 1E3

Name of Inspector(s)/Nom de l'inspecteur(s)
Caroline Tompkins #166
Chantal Lafreniere #194

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a critical incident inspection related to resident care.

During the course of the inspection, the inspectors spoke with: The Acting Administrator, the Director of Care, a Registered Practical Nurse, 3 Personal Support Workers (PSW) and the Resident Service Manager.
During the course of the inspection, the inspectors: Reviewed the resident's clinical records, including the staff communication binder.

Findings of Non-Compliance were found during this inspection. The following action was taken:

3 WN
2 CO: CO #001,#002

NON- COMPLIANCE / (Non-respectés)

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA. 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 suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée. Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with O.Reg.79/10,s.17(1) Every Licensee of a long term care home shall ensure that the home is equipped with a resident –staff communication and response system that,
(a) can be seen, accessed and used by residents, staff and visitors at all times;

Findings. The Director of Care, the Registered Practical Nurse and the Resident Service Manager all identified that at the time of the resident's fall the nurse call bell was not within the resident's reach .

Inspector ID #:	166 and 194

Additional Required Actions:
CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector" form.

WN #2: The Licensee has failed to comply with LTCHA , 2007, S.O.2007 c.8,s.6(10)The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every 6 months and at any other time when,
(b) the resident care needs change or care set out in the plan of care is no longer necessary;

Findings: There was no plan of care addressing the changes of the resident, in relation to:
1. Potential for falls
2. Change in mobility status.
3.The home's compliance history prior to the LTCHA,2007 coming into force identified that resident assessments had previously been issued:

- March 25 2010 and May 27,28 2010, under criteria B4.3
- February 25 2010 under criteria B1.2

Inspector ID #:	166 and 194

Additonal Required Actions:
CO # - 002 will be served on the licensee. Refer to the "Order(s) of the Inspector" form.

WN #3: The Licensee has failed to comply with O.Reg.79/10,s.212 (4) Subject to subsection (5), the licensee shall ensure that everyone hired as an Administrator after the coming into force of this section,
(d) has successfully completed or, subject to subsection (6), is enrolled in, a program in long –term care home administration or management that is a minimum of 100 hours in duration of instruction time.

Findings: During an interview with Acting Administrator it was identified that there has been no permanent administrator of the home since January 6 2011. The acting Administrator role is a temporary arrangement .There was no indication when a permanent replacement would take place. The Acting Administrator, advised that she did not have the qualifications required under O.Reg.79/10,s.212 (4).

Inspector ID #:	166

Signature of Licensee or Representative of Licensee **Signature du Titulaire du représentant désigné**	**Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.**
Title: **Date:**	**Date of Report:** (if different from date(s) of inspection). January 31. 2011

Ontario

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

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

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

	☐ Licensee Copy/Copie du Titulaire ☒ Public Copy/Copie Public		
Name of Inspector:	Caroline Tompkins	**Inspector ID #**	166
Log #:	O-003035		
Inspection Report #:	2011_166_2511_12Jan130035		
Type of Inspection:	Critical Incident		
Date of Inspection:	January 12,13 2011		
Licensee:	Provincial Nursing Homes Limited Partnership Fax 519-966-3002 1090 Morand Street, Windsor,ON N9G 1J6		
LTC Home:	Regency Manor Nursing Home, Division of Provincial Nursing Homes Limited Partnership 66 Dorset Street, Port Hope, ON Fax 905-885-7386 L1A 1E3		
Name of Administrator:	Patty Aitken Acting Administrator		

To Provincial Nursing Homes Limited Partnership , you are hereby required to comply with the following orders by the dates set out below:

Order #:	001	**Order Type:**	Compliance Order, Section 153 (1)(a)
Pursuant to: O.Reg.79/10,s.17(1) Every Licensee of a long term care home shall ensure that the home is equipped with a resident –staff communication and response system that, (a) can be seen, accessed and used by residents, staff and visitors at all times;			
Order: The licensee shall ensure that every resident in the home has access to a resident- staff communication system at all times.			

Grounds: The Director of Care, the Registered Practical Nurse and the Resident Service Manager all identified that at the time of the resident's fall the nurse call bell was not within the resident's reach .	
This order must be complied with by:	Immediately

Order #:	002	**Order Type:**	Compliance Order, Section 153 (1)(b)

Pursuant to: : The Licensee has failed to comply with LTCHA, S.O. 2007,c.8,s.6(10)The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every 6 months and at any other time when,
(b) the resident care needs change or care set out in the plan of care is no longer necessary;

Order:
The licensee shall prepare, submit and implement a plan to ensure that all residents in the home are reassessed and the plan of care reviewed and revised at least every 6 months and at any other time when the resident care needs change.

Grounds :
There was no plan of care addressing the changes of the resident, in relation to:
1. Potential for falls
2. Change in mobility status.
3.The home's compliance history prior to the LTCHA,2007 coming into force identified that resident assessments had previously been issued:

- March 25 2010 and May 27,28 2010, under criteria B4.3
- February 25 2010 under criteria B1.2

This order must be complied with by:	February 14 2011

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 service for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:.

Director
c/o Appeals Clerk
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
55 St. Clair Ave. West
Suite 800, 8th floor
Toronto, ON M4V 2Y2
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 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.

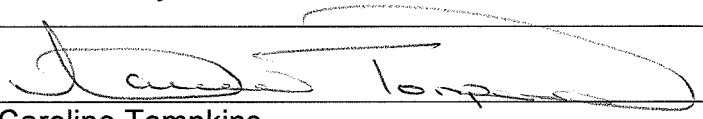
The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the *Long-Term Care Homes Act, 2007*. The HSARB is an independent group of members not connected with the Ministry. They are appointed by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, with 28 days of being served with the notice of the Director's decision, mail or deliver a written notice of appeal to both:

Health Services Appeal and Review Board and the
Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON
M5S 2T5

Director
c/o Appeals Clerk
Performance Improvement and Compliance Branch
55 St. Claire Avenue, West
Suite 800, 8th Floor
Toronto, ON M4V 2Y2

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.

Issued on this 31 day of January , 2011.	
Signature of Inspector:	
Name of Inspector:	Caroline Tompkins
Service Area Office:	Ottawa