



**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**

**Ottawa Service Area Office
347 Preston St, 4th Floor
OTTAWA, ON, K1S-3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670**

**Bureau régional de services d'Ottawa
347, rue Preston, 4^{ième} étage
OTTAWA, ON, K1S-3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Sep 20, 2013	2013_179103_0047	O-000555- 13	Complaint

Licensee/Titulaire de permis

SPECIALTY CARE EAST INC.

400 Applewood Crescent, Suite 110, VAUGHAN, ON, L4K-0C3

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

TRILLIUM CENTRE

800 EDGAR STREET, KINGSTON, ON, K7M-8S4

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

DARLENE MURPHY (103)

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): September 18-19, 2013

During the course of the inspection, the inspector(s) spoke with Residents, the Manager of Human Resources, the Staffing Coordinator, and the Administrator.

During the course of the inspection, the inspector(s) reviewed resident health care records, registered staffing schedules from May 30 to August 21, 2013, the College of Nurses of Ontario (CNO) "Terms, Conditions and Limitations for a Temporary Class membership" and the staffing schedule for the home.

The following Inspection Protocols were used during this inspection:



Prevention of Abuse, Neglect and Retaliation
Sufficient Staffing

Findings of Non-Compliance were found during this inspection.

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. 8.
Nursing and personal support services
Specifically failed to comply with the following:

s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).



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Findings/Faits saillants :



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1. The licensee has failed to comply with LTCHA, 2007, s. 8 (3) whereby the home did not ensure at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times.

Trillium Centre is a 186 bed long term care home. During a complaint inspection, the Human Resources Manager was interviewed and S102 was identified as working with a Temporary Class license. According to the College of Nurses of Ontario (CNO), a Temporary Class Membership is subject to defined terms, conditions and limitations which include the following:

- temporary members must be monitored and directed by a member in the General or Extended class,
- temporary members are not permitted to supervise, monitor or direct the practice of another member in any class. Therefore, it is not appropriate for a temporary member to be solely in-charge or act in a formal leadership role.

Registered staffing schedules were reviewed from May 30 to August 21, 2013. S102 was identified as working independently as the Charge nurse on the following dates/shifts:

July 3, 2013, 1730hr-1900hr
July 13, 2013 -0700hr-1500hr
July 14, 2013-0700hr-1500hr
July 17, 2013-0700hr-1500hr; Director of Nursing and Personal Care on-site
July 18, 2013- 0700hr-1500hr; Director of Nursing and Personal Care on-site
July 22, 2013-0700hr-1500hr
July 23, 2013- 0700hr-1500hr
August 9, 2013-0700hr-1500hr; Director of Nursing and Personal Care on-site
August 19, 2013-0700hr-1500hr
August 20, 2013-0700hr-1500hr

In accordance with Ontario Regulations 79/10 s. 213, a home with a licensed bed capacity of 65 beds or more shall ensure that the home's Director of Nursing and Personal Care (DONPC) works regularly in that position on site at least 35 hours per week. On July 17, 18 and August 9, 2013, the DONPC was identified as being on-site, however, cannot perform the duties of that role as well as the role of Charge Nurse simultaneously. Additionally, on June 11, 2013, the DONPC was the only RN on-site



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from 0700-1500 hours.

In an interview with the Administrator, she advised the home has a staffing plan that addresses times when a RN shift needs to be filled. The Administrator stated overtime is offered first to the RN's working and when this fails, the home has a contract with a nursing agency. The RN's provided by this agency are consistently assigned to work in this home, are already orientated and are available for any shortages. In the identified shifts, the staffing plan was not implemented. The Administrator indicated the staffing plan will be put into effect immediately to ensure compliance. [s. 8. (3)]

Additional Required Actions:

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

Issued on this 20th day of September, 2013

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

A handwritten signature in black ink, appearing to read "Darlene Gough", written over a white background within a rectangular box.



Ministry of Health and
Long-Term Care

Ministère de la Santé et
des Soins de longue durée

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

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) : DARLENE MURPHY (103)

Inspection No. /

No de l'inspection : 2013_179103_0047

Log No. /

Registre no: O-000555-13

Type of Inspection /

Genre d'inspection: Complaint

Report Date(s) /

Date(s) du Rapport : Sep 20, 2013

Licensee /

Titulaire de permis : SPECIALTY CARE EAST INC.
400 Applewood Crescent, Suite 110, VAUGHAN, ON,
L4K-0C3

LTC Home /

Foyer de SLD : TRILLIUM CENTRE
800 EDGAR STREET, KINGSTON, ON, K7M-8S4

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur : ~~JENNIFER POWLEY~~ *Am Dawn Black*

To SPECIALTY CARE EAST INC., 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) (a)

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 8. (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations. 2007, c. 8, s. 8 (3).

Order / Ordre :

The licensee shall ensure that at least one registered nurse is on duty and present in the home at all times and that these registered nurses have a General or Extended class license issued by the College of Nurses of Ontario. The licensee shall utilize their staffing plan when there are short falls in the registered nursing schedule.

Grounds / Motifs :

1. The licensee has failed to comply with LTCHA, 2007, s. 8 (3) whereby the home did not ensure at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times.

Trillium Centre is a 186 bed long term care home. During a complaint inspection, the Human Resources Manager was interviewed and S102 was identified as working with a Temporary Class license. According to the College of Nurses of Ontario (CNO), a Temporary Class Membership is subject to defined terms, conditions and limitations which include the following:

- temporary members must be monitored and directed by a member in the General or Extended class,
- temporary members are not permitted to supervise, monitor or direct the practice of another member in any class. Therefore, it is not appropriate for a temporary member to be solely in-charge or act in a formal leadership role.

Registered staffing schedules were reviewed from May 30 to August 21, 2013.



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section 154 of the *Long-Term Care
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August 9, 2013-0700hr-1500hr; Director of Nursing and Personal Care on-site
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August 20, 2013-0700hr-1500hr

In accordance with Ontario Regulations 79/10 s. 213, a home with a licensed bed capacity of 65 beds or more shall ensure that the home's Director of Nursing and Personal Care (DONPC) works regularly in that position on site at least 35 hours per week. On July 17, 18 and August 9, 2013, the DONPC was identified as being on-site, however, cannot perform the duties of that role as well as the role of Charge Nurse simultaneously. Additionally, on June 11, 2013, the DONPC was the only RN on-site from 0700-1500 hours.

In an interview with the Administrator, she advised the home has a staffing plan that addresses times when a RN shift needs to be filled. The Administrator stated overtime is offered first to the RN's working and when this fails, the home has a contract with a nursing agency. The RN's provided by this agency are consistently assigned to work in this home, are already orientated and are available for any shortages. In the identified shifts, the staffing plan was not implemented. The Administrator indicated the staffing plan will be put into effect immediately to ensure compliance.

(103)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Sep 23, 2013



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Pursuant to section 153 and/or
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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.



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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, 11^e 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.hsarb.on.ca.

Issued on this 20th day of September, 2013

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

Name of Inspector /

Nom de l'inspecteur : DARLENE MURPHY

Service Area Office /

Bureau régional de services : Ottawa Service Area Office