

### INFORMATION REPORT

TO:	Chair and Members Emergency & Community Services Committee
COMMITTEE DATE:	August 12, 2015
SUBJECT/REPORT NO:	Lodges - Long Term Care Quality Inspection Program (CES15043) (Wards 6 & 13)
WARD(S) AFFECTED:	Wards 6 & 13
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SIGNATURE:	

#### **Council Direction:**

Not applicable.

#### Information:

The Ministry of Health and Long Term Care (MOHLTC) is responsible for legislating, regulating, evaluating and funding care and service provided within the 629 Long Term Care (LTC) Homes across the province of Ontario.

On July 1<sup>st</sup>, 2010 the new *Long Term Care Homes Act* (LTCH Act) was enacted. This Act, and its associated *Ontario Regulations 79/10*, included a requirement that all LTC Homes have an "annual inspection". Annual inspections had been a requirement under the previous iteration of legislation but the new system was intended to herald a more transparent, comprehensive and resident focused approach. These new inspections, known as Resident Quality Inspections, or RQIs, are based on an American survey system with modifications to reflect the unique needs of Ontario and to align with the LTCH Act.

While the LTCH Act came into force on July 1<sup>st</sup>, 2010 the new inspection process was not yet fully developed by the MOHLTC. The Ministry advised that by 2011 the inspection process would be fully implemented and all LTC Homes across the province would have a completed RQI.

During 2011, RQIs were completed in some Homes in Ontario but it quickly became apparent that the current roster of 80 Inspectors was insufficient to support the Ministry's commitment to an annual RQI in all 629 Homes. In 2012 the MOHLTC announced that an annual inspection did not necessarily mean the completion of an RQI. The MOHLTC indicated that any inspection completed by an Inspector during the

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calendar year would satisfy the requirement to conduct an "annual inspection". For Homes across the province, including both Macassa Lodge and Wentworth Lodge, this meant that if an Inspector followed up on a complaint or completed follow-up on a Critical Incident System (CIS) report we were unlikely to have an RQI in that year.

In May 2013, the media began to highlight that only 123 of the roughly 630 LTC Homes in Ontario had participated in the RQI process. This negative media coverage prompted the MOHLTC to announce the hiring of 100 additional Compliance Inspectors throughout 2013-2014. With this new influx of human resources the Ministry promised that an RQI would be completed in all Ontario LTC Homes by end of 2014.

This time delay between the enactment of the LTCH Act and the enforcement of its Regulations created some confusion around how to implement the legislation. The new Act had many elements that were congruent with previous legislation but also included a number of mandated requirements that required clarification. Additionally the role of the Compliance Inspectors also changed significantly with the implementation of the Act. In the past the relationship between the Ministry and LTC Home operators had been predicated on an Advisor/Coach/Inspector model wherein Operators could preemptively contact Compliance Advisors to request direction or clarification on legislation and expectations. However with the change in model this opportunity was no longer available and Homes were simply directed to read the Act or contact their legal departments for assistance in interpreting the Act and its Regulations. This dearth of clarity and assistance left Homes unsure if they were consistently or effectively meeting the new requirements of the legislation.

In October 2014, Macassa Lodge participated in its first unannounced RQI under the "new" LTCH Act and its Ontario Regulation 79/10. The RQI was completed over two weeks by four Compliance Inspectors.

#### Summary of 2014 RQI Results at Macassa Lodge

Macassa Lodge was provided with an inspection report which included a total of 23 Written Notifications. These identified areas of non-compliance further resulted in 3 Compliance Orders (CO) and 9 Voluntary Plans of Correction (VPC). Appendix A to Report CES15043 provides a description as well as actions taken on all of the Written Notifications.

### Summary of 2014 RQI Results at Wentworth Lodge

Wentworth Lodge had their annual RQI in November 2014 and they received 9 Written Notifications. All findings have been reviewed and resolved (Appendix B to Report CES15043). They have not yet had their annual 2015 RQI. Staff will be providing an update on Wentworth Lodge, once this RQI takes place.

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#### Summary of 2015 RQI Results at Macassa Lodge

Three Compliance Inspectors visited Macassa Lodge in June 2015 for almost two weeks to complete the "annual inspection". This RQI was completed seven months after Macassa Lodge's last RQI. Annual inspections can occur at any time within the next calendar year. Some LTC Homes have had their annual inspection within four months of their last RQI. This frequency for annual inspections can create challenges to fully comply with some written notifications before the next annual visit.

The 2015 Inspection Report outlines nine Written Notifications, with one Compliance Order and three Voluntary Plans of Correction. Appendix C to Report CES15043 provides a summary of the findings as well as actions taken to date.

#### Key Concerns Related to the Long Term Care Resident Quality Inspection Program

Ontario Association of Non-Profit Homes and Services for Seniors (OANHSS) have brought forward to the Auditor General and the MOHLTC, on the sector's behalf, a list of concerns related to the compliance program. OANHSS and its member organizations, including both Macassa Lodge and Wentworth Lodge, have highlighted key issues including:

- Conduct of Inspectors concerns with Inspectors during the investigations and inspections being intimidating to staff, disruptive to staff and residents, and generally lacking a resident or family centred approach;
- Investigative Approach of Inspectors at times the Inspectors may not have the requisite training to accurately or effectively investigate issues in medically complex residents or those with complex behavioural health conditions;
- Real or Perceived Bias of Inspectors Inspectors can be former employees
  of the Homes they are inspecting. The Ministry has a policy that Inspector
  must be one year out from working in the assigned Home but that seems
  insufficient to manage bias;
- Inconsistencies training, experience, approaches, responses and findings are noted to be inconsistent between Inspectors despite the use of standardized processes;
- Unreasonableness Regarding Non-Compliances the current system is predicated on a premise that only areas of non-compliance are highlighted in the Inspection Report. This produces an unbalanced and often unfair representation of the care offered in LTC Homes. Additionally some compliance orders carry significant financial ramifications which cannot be easily or readily addressed within the Home. Further some areas of noncompliance are the direct result of systemic issues over which LTC Homes have little control;
- Public Reports the Inspection reports are publically available but insufficient information and context is available to assist in interpreting and understanding the findings. The reports can contain inaccurate information,

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- are often unclear, repetitive, misleading and sometimes convey a perceived lack of balance with regards to the care and services offered in LTC; and,
- Lack of Meaningful Compliance Data —only limited information has been shared with LTC Homes despite the plethora of information collected and analyzed from RQIs. This information could significantly improve the sector's delivery of safe, high quality care for residents.

In February of 2015 the Ministry requested LTC Homes complete a survey to gather feedback regarding the new LTC Quality Inspection Program. The results of that survey were recently shared in a MOHLTC webinar. The comment themes mirror the key concerns previously reviewed:

- Length of time of inspection;
- Stress levels on Home, staff and residents;
- Inspection focus on negative outcomes, non-compliances and finding fault;
- Attitude / experience and demeanour of Inspectors;
- Communication at time of inspection;
- Strict inspection role versus previous advisory role of Inspectors;
- Length of time to receipt of Inspection Report;
- Consistency in approach and process between Inspectors; and,
- Planned frequency of RQIs recommendations for risk based approach.

### **Next Steps for Macassa and Wentworth Lodge:**

Staff firmly believes in and supports the intent behind the Long Term Care Inspection Program. Quality improvement has long been a focus for the Lodges and staff has annually gathered resident and family satisfaction data to direct and evaluate their efforts with very excellent results (e.g. 96% overall resident satisfaction rating of the Lodges). Staff has also engaged in extensive data collection as it relates to resident care and service to ensure the best possible care. With the advent the LTCH Act and its Regulation staff has been on a learning curve to understand the new expectations from the Ministry.

In a recent MOHLTC webinar it was noted that during RQIs from June 2013 to January 2015, on average, Homes were issued 12 Written Notifications (WN), including two Compliance Orders (CO). The 2015 RQI with nine WNs and one CO positions Macassa Lodge below those averages and helps to illustrate staffs' improvement efforts following the 2014 RQI.

Staff is working closely with the Ontario Association of Not-Profit Homes and Services for Seniors (OANHSS) which is advocating for changes to the LTCH Act. Further to this, staff is participating on the provincial Long Term Care Quality Improvement Program (LQIP) where they can advocate for improvements to the existing LTCH Act.

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#### APPENDICES AND SCHEDULES ATTACHED

Appendix A to Report CES15043: Ministry of Health and Long Term Care 2014

Resident Quality Inspection – Macassa Lodge

Appendix B to Report CES15043: Ministry of Health and Long Term Care 2014

Resident Quality Inspection - Wentworth Lodge

Appendix C to Report CES15043: Ministry of Health and Long Term Care 2015

Resident Quality Inspection – Macassa Lodge