

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 prévue le Loi de 2007 les foyers de soins de longue

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

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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jun 13, 14, 2011	2011_060127_0012	Critical Incident
Licensee/Titulaire de permis		
BELLA SENIOR CARE RESIDENCES 1000 FINCH AVENUE WEST, SUITE 9 Long-Term Care Home/Foyer de soin	01, TORONTO, ON, M3J-2V5	
BELLA SENIOR CARE RESIDENCES 8720 Willoughby Drive, NIAGARA FALI		restr.
Name of Inspector(s)/Nom de l'inspe	cteur ou des inspecteurs	
RICHARD HAYDEN (127)		
	Inspection Summary/Résumé de l'inspe	ection

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The purpose of this inspection was to conduct a Critical Incident inspection.

During the course of the inspection, the inspector(s) spoke with the administrator, director of care, registered staff, residents and family members.

During the course of the inspection, the inspector(s) reviewed a resident's chart and electronic record and checked the security of doors that lead to stairways and to the outside.

The following Inspection Protocols were used in part or in whole during this inspection: Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

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NON-COMPLIANCE / NON-R	PERPECT DES EVICENCES
NON-COMPLIANCE/ NON-N	COFECT DES EXIGENCES
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Definitions	Definitions
	를 보통했습니다. 전략 전략 등 보통 보다는 것이 되었습니다. 그는 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은
WN - Written Notification	WN - Avis écrit
VPC - Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR — Director Referral	DR - Alguillage au directeur
CO Compliance Order	CO - Ordre de conformité
CO - Compliance Order	
WAO - Work and Activity Order	IWAO – Ordres : travaux et activités
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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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 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.

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 O.Reg 79/10, s. 9. Doors in a home Every licensee of a long-term care home shall ensure that the following rules are complied with:

- 1. All doors leading to stairways and the outside of the home must be,
- i. kept closed and locked,
- ii. equipped with a door access control system that is kept on at all times, and
- iii. equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,
- A. is connected to the resident-staff communication and response system, or
- B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.
- 2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents.
- 3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.
- 4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9.

## Findings/Faits sayants:

- 1. 1. On June 13, 2011 the inspector observed one door on 2nd floor and two doors on 3rd floor which led to the outside secured balconies were not locked or alarmed.
- 2. On June 13, 2011 the inspector confirmed that on the day of the incident, an identified resident exited the home where he/she fell and was injured. A door was left unlocked permitting the resident to exit; and the door alarm was on bypass and did not sound when the door was opened.

## Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance with ensuring doors that lead to the outside of the home are kept closed and locked with the door access control system kept on at all times, to be implemented voluntarily.

Issued on this 24th day of June, 2011



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Signature of Inspector(s)/Signature	ure de l'inspecteur ou des inspe	ecteurs
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