

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*

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

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	Licensee Copy/Copie du Titulair	e Public Copy/Copie Public		
Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection		
July 13, 2011	2011-159120-0022	-000010-11 Critical Incident		
Licensee/Titulaire				
MacGowan Nursing Homes Ltd., RR#1, P.	.O. Box 1060, Wingham, ON NOG	3 2W0		
Long-Term Care Home/Foyer de soins de lo	ongue durée			
Braemar Retirement Centre, 719 Josephin	ne St., N., Wingham, ON N0G 2W	' 0		
Name of Inspector(s)/Nom de l'inspecteur(s	3)			
Bernadette Susnik - Environmental Health				
Inspection Summary/Sommaire d'inspection				
The purpose of this visit was to conduct a Critical Incident (#2788-00007-11) inspection. During the course of the inspection, the inspector spoke with the Director of Resident Care and Environmental Supervisor. During the course of the inspection, the inspector conducted a walk-through of the home and evaluated each door leading to an unenclosed outdoor space, tested the audibility of the resident-staff communication system and reviewed policies and procedures. The following Inspection Protocol was used during this inspection: • Safe and Secure Home				
Findings of Non-Compliance were four 2 WN 2 CO: #001, #002	nd during this inspection. The	following action was taken:		



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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. 9.1 i, ii. 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

Findings:

Four doors, one at the end of each of three wings in the home and a door at the end of the service corridor, are not equipped with an access control system (magnetic lock or similar) and are therefore not locked. Residents are able to exit through these doors unimpeded and gain access to the street. The fact that these doors are designated fire exits would prohibit them from being locked and in such a case, the type of locking mechanism would need to release when a fire alarm is engaged.

Additional Required Action:

CO - #001 Please refer to the "Order of Inspector" Form for details.

WN#2: The licensee has failed to comply with O. Reg. 79/10, s. 17.(1)(g). Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that.

(g) _in the case of a system that uses sound to alert staff, is properly calibrated so that the level of sound is audible to staff.

Findings:

All four doors noted above are currently equipped with an alarm which sounds only at the main nurse's desk which is centrally located. The alarm was tested and noted to produce a very subtle sound while at the nurse's station. The audibility was tested at the end of a corridor and it could not be heard. Staff should be alerted to the resident-staff communication and response system (which also includes the door alarms) where ever they may be working in the home.

Additional Required Action:

CO - #002 Please refer to the "Order of Inspector" Form for details.



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	e or Representative of Licensee e 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.
		B. Sunk
Title:	Date:	Date of Report: (if different from date(s) of inspection).
		July 20/11



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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 Co	py/Copie Public
Name of Inspector:	Bernadette Susnik	Inspector ID #	120
Log #:	1-000010-11 L-00/095-	-11	
Inspection Report #:	2011-159120-022		
Type of Inspection:	Critical Incident		
Date of Inspection:	July 13, 2011		
Licensee:	MacGowan Nursing Homes Ltd		
LTC Home:	Braemar Retirement Centre		
Name of Administrator:	Archie McGowan		

Order #:	001	Order Type:	Compliance Order, Section 153 (1)(a)
	: The licensee has fance shall ensure that the		ith O. Reg. 79/10, s.9.1.ii, ii. Every licensee of a long- are complied with:
i. kep	s leading to stairways at closed and locked, ipped with a door acce		of the home must be, m that is kept on at all times
Order:			
	eading directly to the owith a door access co		resident can gain access to the street, shall be

Code. **Grounds:**

Four doors, one at the end of each of three wings in the home and a door at the end of the service corridor, are not equipped with an access control system (magnetic lock or similar) and are therefore not

The door access control system must comply with all applicable codes and standards such as the Fire



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locked. Residents are able to exit through these doors unimpeded and gain access to the street. The fact that these doors are designated fire exits would prohibit them from being locked and in such a case, the type of locking mechanism would need to release when a fire alarm is engaged.

This order must be complied with by: October 15, 2011

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

Pursuant to: The licensee has failed to comply with O. Reg. 79/10, s. 17(1)(g). Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that,

(g) in the case of a system that uses sound to alert staff, is properly calibrated so that the level of sound is audible to staff.

Order:

Additional speakers are to be installed in the home, so that the sound of the resident-staff
communication and response system is heard by staff where ever they may be working throughout the
home. The sound shall be calibrated equally throughout the home so that it is not louder in one area
over another. The type of "sound" chosen for the system is to be evaluated so as not to overly disturb
residents who are trying to sleep.

Grounds:

All four doors noted above are currently equipped with an alarm which sounds only at the main nurse's desk which is centrally located. The alarm was tested and noted to produce a very subtle sound while at the nurse's station. The audibility was tested at the end of a corridor and it could not be heard. Staff should be alerted to the resident-staff communication and response system (which also includes the door alarms) where ever they may be working in the home.

This order must be complied with by: October 15, 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



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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 20th day of	of July, 2011.	***************************************
Signature of Inspector:	B. Sugark	
Name of Inspector:	Bernadette Susnik	****
Service Area Office:	Hamilton	(10)