



**Ministry of Health and
Long-Term Care**

**Ministère de la Santé et des
Soins de longue durée**

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

**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**

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Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Sep 22, 2015	2015_277538_0025	008301-15	Follow up

Licensee/Titulaire de permis

CARESSANT-CARE NURSING AND RETIREMENT HOMES LIMITED
264 NORWICH AVENUE WOODSTOCK ON N4S 3V9

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

CARESSANT CARE ON BONNIE PLACE
15 Bonnie Place St Thomas ON N5R 5T8

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

NANCY JOHNSON (538)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): September 8, 9, and 10, 2015.

Follow-up inspections were completed for orders issued during the Resident Quality Inspection (RQI) L-001766-15/2015_277538_0002.

Inspection Order #001, related to Resident's Rights was completed and the



licensee was found to be in compliance with the Residents right to be treated with dignity and respect at this time.

Inspection Order #002, related to a Registered Nurse being on duty and present in the home at all times was completed and licensee was found to be in compliance at this time.

Inspection Order #003, related to maintenance and housekeeping, was completed and licensee was found to be in compliance with the home being kept clean and sanitary at this time. Further inspection related to maintenance and housekeeping was completed and the licensee was found to be in compliance with the home, furnishings and equipment being in a safe condition and in a good state of repair this time.

Inspection Order #004, related to Resident and Family Council in developing and carrying out the survey, and in acting on its results was completed and licensee was found to be in compliance at the this time.

Inspection Order #005, related to procedures for cleaning was completed and the licensee was found to be in compliance at this time.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, one Maintenance staff, one Registered Practical Nurse, and two Health Care Aides.

The Inspector reviewed policies and procedures, and relevant documents related to the inspection, toured all resident care areas, observed provision of resident care, and staff/resident interactions.

The following Inspection Protocols were used during this inspection:

Accommodation Services - Housekeeping

Accommodation Services - Maintenance

Family Council

Residents' Council

Safe and Secure Home

Sufficient Staffing



During the course of this inspection, Non-Compliances were issued.

1 WN(s)
1 VPC(s)
0 CO(s)
0 DR(s)
0 WAO(s)

The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
LTCHA, 2007 S.O. 2007, c.8 s. 15. (2)	CO #003	2015_277538_0002		538
LTCHA, 2007 S.O. 2007, c.8 s. 3. (1)	CO #001	2015_277538_0002		538
LTCHA, 2007 S.O. 2007, c.8 s. 8. (3)	CO #002	2015_277538_0002		538
LTCHA, 2007 S.O. 2007, c.8 s. 85. (3)	CO #004	2015_277538_0002		538
O.Reg 79/10 s. 87. (2)	CO #005	2015_277538_0002		538



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 9. Doors in a home
Specifically failed to comply with the following:**

**s. 9. (1) Every licensee of a long-term care home shall ensure that the following
rules are complied with:**

**2. All doors leading to non-residential areas must be equipped with locks to
restrict unsupervised access to those areas by residents, and those doors must
be kept closed and locked when they are not being supervised by staff. O. Reg.
79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).**

Findings/Faits saillants :

1. The licensee has failed to ensure that doors leading to a non-residential area equipped with locks to restrict unsupervised access to the area by residents, was locked when they were not being supervised by staff.

Observation of the Electrical Room on September 9, 2015, revealed the door to the electrical room was propped open, unlocked and unattended.

Staff interview with Maintenance revealed that housekeeping had propped open the door to retrieve a piece of equipment and did not re-lock the door.

Staff interview with the Administrator confirmed that the electrical room was to be locked at all times. It was the expectation of the home that doors leading to a non-residential area equipped with locks are locked when they were not being supervised by staff. [s. 9. (1) 2.]

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 to ensure that doors leading to a non-residential area equipped with locks to restrict unsupervised access to the area by residents, and locked when they were not being supervised by staff., to be implemented voluntarily.



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Issued on this 22nd day of September, 2015

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

Original report signed by the inspector.