

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

Rapport d'inspection prévue  
sous *la Loi de 2007 sur les foyers  
de soins de longue durée*

Long-Term Care Homes Division  
Long-Term Care Inspections Branch

Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée

Hamilton Service Area Office  
119 King Street West 11th Floor  
HAMILTON ON L8P 4Y7  
Telephone: (905) 546-8294  
Facsimile: (905) 546-8255

Bureau régional de services de  
Hamilton  
119, rue King Ouest 11<sup>ième</sup> étage  
HAMILTON ON L8P 4Y7  
Téléphone: (905) 546-8294  
Télécopieur: (905) 546-8255

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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Aug 30, 2019	2019_587129_0012	013699-19	Complaint

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**Licensee/Titulaire de permis**

Maplewood Nursing Home Limited  
73 Bidwell Street TILLSONBURG ON N4G 3T8

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

Cedarwood Village  
500 Queensway West SIMCOE ON N3Y 4R4

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

PHYLLIS HILTZ-BONTJE (129)

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**Inspection Summary/Résumé de l'inspection**

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**The purpose of this inspection was to conduct a Complaint inspection.**

**This inspection was conducted on the following date(s): August 13, 14, 15, 2019.**

**The following complaint intake was inspected: 013699-19 - related to the homes processes for managing hot weather issues for residents.**

**During the course of the inspection, the inspector(s) spoke with residents, person of importance to a resident, Personal Support Workers, Registered Practical Nurses, Registered Nurses, Resident Assessment Instrument-Minimum Data Set Coordinator, Maintenance Coordinator, Program Manager, Nutrition Manager, Clinical Coordinator, Director of Care and the Administrator.**

**During the course of this inspection the inspector made observations of residents and the home environment, reviewed residents clinical records, reviewed monitoring records maintained by the home as well as the licensee's Heat Management Manual.**

**The following Inspection Protocols were used during this inspection:  
Recreation and Social Activities  
Safe and Secure Home**

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

**3 WN(s)**

**3 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**

**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>Légende</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 LTCHA, 2007 S.O. 2007, c.8, s. 6. Plan of care**

**Specifically failed to comply with the following:**

**s. 6. (2) The licensee shall ensure that the care set out in the plan of care is based on an assessment of the resident and the needs and preferences of that resident. 2007, c. 8, s. 6 (2).**

**Findings/Faits saillants :**

1. The licensee failed to ensure that care set out in the plan of care was based on an

assessment of resident needs and preferences.

a) The care set out in resident #002's plan of care was not based on a heat risk assessment.

A heat risk assessment was completed for resident #002 on an identified date, and identified that the resident was at risk for hot weather related illness. The assessment indicated four factors that lead to the high risk score that included; an identified diagnosis and the administration of three identified medications.

A review of resident #002's written plan of care indicated the plan did not contain a care focus, care goals or interventions to manage the identified risk the resident had for experiencing hot weather related illness.

During a discussion with Registered Nurse (RN) #105 on an identified date, they reviewed the above noted heat risk assessment and confirmed the resident had been identified at risk for hot weather related illness. At this time they also reviewed resident #002's written plan of care and confirmed that a plan of care related to the management of the identified risk had not been developed and there were no directions for staff to implement strategies for management of the risk that the resident may experience illness during hot weather.

A review of clinical documentation and RN #105 confirmed that resident #002's plan of care was not based on an assessment that identified the resident was at risk for hot weather related illness.

b) The care set out in resident #004's plan of care was not based on a heat risk assessment.

A heat risk assessment was completed for resident #004 on an identified date, and identified that the resident was at risk for hot weather related illness. The assessment indicated five factors that lead to the risk score that included; two identified diagnoses and the administration of three identified medications.

A review of resident #004's written plan of care indicated that the plan of care did not contain a care focus, care goals or interventions to manage the risk the resident had for experiencing hot weather related illness.

During a discussion with RN #105 on an identified date, they reviewed the above noted heat risk assessment and confirmed the resident had been identified at risk for hot

weather related illness. At this time they also reviewed resident #004's written plan of care and confirmed that a plan of care related to the management of the identified risk had not been developed and there were no directions for staff to implement strategies for management of the risk that the resident may experience illness during hot weather.

A review of clinical documentation and RN #105 confirmed that resident #004's plan of care was not based on an assessment that identified the resident was at high risk for hot weather related illness. [s. 6. (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 and ensuring that the care set out in the plan of care is based on an assessment of the resident and their needs and preferences, to be implemented voluntarily.***

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**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 20. Cooling requirements**

**Specifically failed to comply with the following:**

**s. 20. (1) Every licensee of a long-term care home shall ensure that a written hot weather related illness prevention and management plan for the home that meets the needs of the residents is developed in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices and is implemented when required to address the adverse effects on residents related to heat. O. Reg. 79/10, s. 20 (1).**

**Findings/Faits saillants :**

1. The licensee failed to ensure that the written hot weather-related illness prevention and management plans for the home were developed in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices.

The document "Guidelines for the Prevention and Management of Hot Weather-Related Illness in Long-Term Care Homes", produced by the Performance Improvement and

Compliance - Ministry of Health and Long-Term Care (MOHLTC), updated July 2012, is considered a reference for evidenced based practices. The purpose of the Guidelines states; "At the time of publication, these Guidelines reflect multiple sources of evidence-based practices and can be used in conjunction with other expert sources of evidenced-based practices as a point of reference for long-term care homes in developing or enhancing their own customized hot weather illness prevention and management plans consistent with the requirements outlined in s. 20(1) of O. Reg. 79/10."

The above noted guidelines contain information that includes:

- Overview of hot weather condition in Ontario (temperature, humidity, heat health alert systems, heat alert and extreme heat alert),
- Overview of hot weather-related illness and conditions,
- Protecting residents living in Long Term Care Homes (LTCH) in hot weather conditions,
- Resident risk assessment,
- Preparation and planning information related to the roles of Administration, all staff, Medical/Nursing, Food Service/Nutritional care, Activation, and physical plant maintenance.
- Prevention related to the roles of Administration, all staff, Medical/Nursing, Food Service/Nutritional care, Activation, and physical plant maintenance,
- Interventions related to the roles of Administration, all staff, Medical/Nursing, Food Service/Nutritional care, Activation, and physical plant maintenance,
- Glossary,
- Resources (two pages of additional resources),
- Tips for protecting LTCH staff in hot weather conditions,
- Taking humidity and temperature readings,
- Description, symptoms and steps to take for hot weather-related illness,
- Impact of hot weather on indoor environments,
- Strategies to keep the indoor environment cooler, and
- As well as Family tip sheet for LTCH residents' outings during hot weather.

On an identified date, in response to a request for the licensee's hot weather-related illness prevention and management plan, the Director of Care (DOC) provided a document titled, "Heat Management Manual". The manual included four double sided pages and a single page identified as "Heat Assessment". Documents included in the manual were dated June 2006.

During a discussion with the Administrator and DOC on an identified date, the inspector provided the following information gathered while inspecting a concern related to

management of hot weather issues for residents:

- Not all residents had been assessed for the risk of hot weather-related incidents,
- Not all residents who had been identified at high risk had corresponding plans of care developed to manage the identified risk,
- Registered staff were not consistently monitoring environmental temperatures,
- When temperatures were monitored they were monitored at nursing stations and in two air-conditioned dining rooms,
- Registered staff who monitored temperatures were unaware of temperature levels that would pose a risk to residents or a system for alerting all disciplines when temperatures readings were high,
- Staff interviewed acknowledged they were not aware of residents that had been identified at high risk and it was observed that there was not a list of those residents available at the time of the inspection,
- Heat risk assessments were completed by Resident Assessment Instrument (RAI) Coordinators and the names of residents identified at high risk were not communicated to interdisciplinary team members,
- A review of the licensee's "Heat Management Manual" confirmed that there were not clear directions to staff related to the above noted issues and the manual did not provided directions for staff related to hot weather conditions, hot weather-related illness and conditions, risk assessments and interdisciplinary responsibilities related to the management of hot weather conditions.

Following the above noted discussion, the Administrator acknowledged they were aware of the guidelines for the prevention and management of hot weather-related illness provided by the MOHLTC in July 2012. The Administrator also acknowledged that the licensee's hot weather illness prevention and management plans had not been revised and did not currently reflect evidence-based practices or prevailing practices. [s. 20. (1)]

***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 and ensuring that the written hot weather-related illness prevention and management plans for the home are developed in accordance with evidenced-based practices and, if there are none, in accordance with prevailing practices, to be implemented voluntarily.***

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**WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 26. Plan of care  
Specifically failed to comply with the following:**

**s. 26. (3) A plan of care must be based on, at a minimum, interdisciplinary assessment of the following with respect to the resident:**

**11. Seasonal risk relating to hot weather. O. Reg. 79/10, s. 26 (3).**

**Findings/Faits saillants :**

1. The licensee failed to ensure that resident #001's plan of care was based, at a minimum, an interdisciplinary assessment of seasonal risk related to hot weather.

Resident #001 was admitted to the home on an identified date. During a discussion with Registered Practical Nurse (RPN) #104, they indicated the heat risk assessments were completed by the Resident Assessment Instrument (RAI) coordinators in the computerized clinical record. At this time RPN #104 reviewed resident #001's clinical record and confirmed that a heat risk assessment had not been completed.

During a discussion with RAI Coordinator #105, they confirmed that the two RAI coordinators complete the heat risk assessments annually. At this time they reviewed resident #001's clinical record and confirmed that a heat risk assessment had not been completed for the resident.

A review of clinical documentation, RPN #104 and RAI Coordinator #105 confirmed that resident #001's plan of care was not based on an assessment of seasonal risk related to hot weather. [s. 26. (3) 11.]

***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 and ensuring the plan of care is based, at a minimum, an interdisciplinary assessment of seasonal risks related to hot weather, to be implemented voluntarily.***

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Issued on this 30th day of August, 2019

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

**Original report signed by the inspector.**