



**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

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

Division de la responsabilisation et de la performance du
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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
November 2 & 3, 2010	2010-120-2655-02NOV170830	Follow-up to May 14, 2009

Licensee/Titulaire
Diversicare IV Limited Partnership, 458 Glencairn Ave., Toronto, ON M5N 1V7

Long-Term Care Home/Foyer de soins de longue durée
Chelsey Park Oxford Nursing Home, 310 Oxford Street West, London, ON N6H 4N6

Name of Inspector(s)/Nom de l'inspecteur(s)
Bernadette Susnik, LTC Homes Inspector – Environmental Health #120

Inspection Summary/Sommaire d'inspection

The purpose of this visit was to conduct a follow-up inspection to previously issued non-compliance made under the Nursing Homes Act, 1990, O. Reg. 832/90, s. 21(1) related to housekeeping and maintenance.

During the course of the inspection, the inspector spoke with the administrator, maintenance staff, director of care and nursing staff. The inspector also conducted a walk-through of the building and tested the perimeter and stairwell door access control systems, inspected many resident bedrooms, utility rooms, washrooms, dining areas, common bathing areas and reviewed documentation.

The following Inspection Protocols were used:

- Accommodation Services – Maintenance
- Accommodation Services – Housekeeping
- Infection Prevention and Control
- Safe and Secure Home

Findings of Non-Compliance were found during this inspection. The following action was taken:

- 4 WN
- 4 VPC

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 the LTCHA, 2007, S.O. 2007, c.8, s.15(2)(a) Every licensee of a long-term care home shall ensure that,

(a) the home, furnishings and equipment are kept clean and sanitary.

Findings:

1. Heavy dust accumulations on wardrobe tops, heaters, overbed light surfaces in resident bedrooms and on exhaust grills in resident washrooms.
2. Flooring surfaces on the 5th and 2nd floors noted to be dusty, with accumulated debris in and around furnishings. Rooms with textured faux wood surfaces noted to be soiled in appearance (black).
3. All 4 tub lift seat bases located in the tub rooms noted to be very soiled.
4. Chrome commode chair frames identified in several resident rooms have accumulated matter on them.

Previously issued as an area of non-compliance under O. Reg. 832/90, s. 21(1).

Additional Required Action:

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 s.15(2)(a) in respect to ensuring that the home, furnishings and equipment are kept clean and sanitary, to be implemented voluntarily.

WN #2: The licensee has failed to comply with the LTCHA, 2007, S.O. 2007, c.8, s. 15(2)(c) Every licensee of a long-term care home shall ensure that,

(c) the home, furnishings and equipment are maintained in a safe condition and in a good state of repair.

Findings:

1. Wall surfaces are heavily scuffed in many resident rooms on the 3rd floor. Paint is peeling from door frames in resident rooms in all areas of the home.
2. Each of the clean utility rooms has white particle board shelving which is rough and peeling and is difficult to clean.
3. Flooring material in the 5th floor tub room is cracked (along wall/floor joint), floor is ripped in a resident room (under sofa chair), a very long and deep crack noted in one resident room and the flooring is lifting in the 2nd floor tub room, around the floor drain under the tub.

4. Rusty soiled hamper frames noted in the 2nd floor tub room and several rusty commode chair frames noted.
5. Window screens are ripped or have holes in them in various resident rooms.
6. The material on four stools used by staff in the 3rd floor dining room is split
7. Wardrobe bases are damaged and splitting in many resident bedrooms.
8. Lower cabinets located in the 5th floor soiled utility room are water damaged and are missing a lower shelf.
9. Night table tops in many resident rooms are chipped, exposing particle board, making it difficult to clean.
10. Light pulls missing from various resident overhead lights or the pulls are not cleanable.
11. Toilet seats are loose in various resident washrooms.
12. Shower room not available for immediate use on 5th floor (cluttered with objects and not clean)
13. The water from the toilet tank is leaking down into the toilet bowl in various resident washrooms.

Previously issued as an area of non-compliance under O. Reg. 832/90, s. 21(1).

Additional Required Action:

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 s.15(2)(c) in respect to ensuring that the home, furnishings and equipment are maintained in a safe condition and in a good state of repair, to be implemented voluntarily.

WN #3: The licensee has failed to comply with O. Reg. 79/10, s.13. Every licensee of a long-term care home shall ensure that every resident bedroom occupied by more than one resident has sufficient privacy curtains to provide privacy.

Findings:

Privacy curtains in various resident rooms do not extend track end to track end. No velcro or closing device is available on curtains in some resident rooms to keep panels closed across the ceiling lift track. Privacy curtain panels were noted above the level of the mattress in several resident rooms.

Additional Required Action:

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 s.13 in respect to ensuring that every resident bedroom occupied by more than one resident has sufficient privacy curtains to provide privacy, to be implemented voluntarily.

WN #4: The licensee has failed to comply with O. Reg. 79/10, s. 9. 1. i. and ii. A 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
 - A. is connected to the resident-staff communication and response system

Findings:

1. Stairwells from the 5th, 4th and 2nd floors are not locked to prevent resident access and are not connected to the resident access control system.



2. Stairwells leading up to the upper floors from the main level are not secured to prevent residents from accessing them.

Additional Required Action:

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 s.9. 1 ii and ii A in respect to ensuring that all doors leading to stairways and the outside of the home are kept closed and locked, equipped with a door access control system that is kept on at all times, and connected to the resident-staff communication and response system, to be implemented voluntarily.

Signature of Licensee or Representative of Licensee
Signature du Titulaire 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. Susnik

Title: Date:

Date of Report: (if different from date(s) of inspection).

Dec. 3/10