



**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
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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
Oct 16, 2015	2015_189120_0075	H-003047-15	Complaint

Licensee/Titulaire de permis

REVERA LONG TERM CARE INC.
55 STANDISH COURT 8TH FLOOR MISSISSAUGA ON L5R 4B2

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

DOVER CLIFFS
501 St George Street P.O. BOX 430 Port Dover ON N0A 1N0

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

BERNADETTE SUSNIK (120)

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): September 24, 2015

During the course of the inspection, the inspector(s) spoke with the Executive Director, Environmental Services Supervisor, Food Services Supervisor, Registered and non-registered staff regarding the home's pest control program.

During the course of the inspection, the inspector toured the interior and exterior of the building, reviewed a pest control service report (regarding the removal/destruction bat bugs), a wildlife removal service report (regarding the removal of bats), ceiling tile removal process (containing low risk type 1 asbestos), the licensee's bat and pest control policies and procedures and family and staff notifications regarding actions being taken to address bats, bat bugs and asbestos abatement in the home.

**The following Inspection Protocols were used during this inspection:
Accommodation Services - Housekeeping**

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)

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. 88. Pest control
Specifically failed to comply with the following:**

s. 88. (1) As part of organized programs of housekeeping and maintenance services under clauses 15 (1) (a) and (c) of the Act, every licensee of a long-term care home shall ensure that an organized preventive pest control program using the services of a licensed pest controller is in place at the home, including records indicating the dates of visits and actions taken. O. Reg. 79/10, s. 88 (1).

Findings/Faits saillants :

1. As part of organized programs of housekeeping and maintenance services under



clauses 15 (1) (a) and (c) of the Act, the licensee of the long-term care home did not ensure that an organized preventive pest control program was in place at the home which included records of actions taken.

According to staff who worked in the long term care home for more than 15 years, bats have entered the home on a regular basis each summer over the course of many years. The number of bats would vary over the summer months from zero per month to one every two weeks. Staff reported catching the bats in the basement, 1st and 2nd floors with a net and releasing them outside. Some staff reported the incident verbally to management and registered staff documented the incident on the "24 hour report". According to all staff interviewed, no formal program was in place to deal with the bats, their droppings, bat bugs or how to determine if a bat had bitten a resident or worker and the follow up actions necessary to ensure they remained Rabies free. A formal pest control program would have included a procedure to deal with live and dead bats and their droppings, a maintenance program to evaluate and seal off any entry points into the building, a formal reporting system for staff to record when and where bats were found in the home, an evaluation of each incident to determine if there was any probable contact with a resident or worker and follow up actions including but not limited to the involvement of the appropriate pest control contractor.

During the month of July 2015, an increase in the usual number of bats seen inside the home was reported by staff to management. Six bats were reported in the home between July 22 and July 30, 2015. The increase was attributed to the removal of some trees and an abandoned house behind the long term care home property. Bats were determined to have entered the building through openings along the roof line near the elevator shaft and migrated towards an area above the nurse's station on the 2nd floor. Bats subsequently squeezed through holes in the ceiling tile (around exit signs) and entered the corridor on the 2nd floor. No explanation could be given as to how 2 bats entered the basement on July 30, 2015. The management staff initiated actions on July 25, 2015 to have the bats removed and the building sealed to prevent future entry. The Halidmand-Norfolk Public Health Unit was notified by management and direction given to ensure that the physician for the home was aware of the fact that bats were in the home and to evaluate if residents or staff were bitten and would therefore require anti-rabies vaccine. According to the Executive Director, no complaints or reports were ever submitted indicating that someone had been bitten by a bat. According to a Public Health Inspector and Public Health Nurse, no reports were received that anyone was bitten in the home.



Upon inspection with the Environmental Services Supervisor (ESS) of the exterior of the building on September 24, 2015, confirmation was made that caulking was applied under the roof flashing to seal openings along the roof line, however many small openings were noted around the basement windows. The windows were observed to have eroded wood trim and caulking, allowing insects, mice and possibly bats into the basement. According to the ESS, a routine inspection of the exterior of the building was not a task that he had included in his maintenance duties. Prior to leaving the home on September 24, 2015, the ESS had the windows re-caulked to seal any openings. A formal policy and procedure "Bat and Bat Bug Control" was developed on August 4, 2015, however the procedure prior to July 2015 titled "Pest Control" (ESP-C-40) was the only document in the home for staff guidance. The former document was general and not specific to bats. It identified that pest control was the responsibility of the Environmental Manager (ESM) and Executive Director (ED) and that the home would be kept free of rodents and pests. The ESM and ED were required to ensure that a record was kept of the location, number and description of all pests sighted and to implement effective preventive maintenance (i.e. inspect baseboards, walls and openings) strategies and use the services of a licensed pest control company. Although the licensee had a contract with a licensed pest control contractor, they were not trained or equipped to deal with bats and management staff subsequently contacted a specialized wildlife removal company to carry out the work.

The licensee delayed in taking adequate action over the years until the influx of bats in July 2015 to keep the building free of pests. There was no formal reporting mechanisms, no written documentation as to any follow up actions and no involvement of a qualified pest control contractor to deal with the bats. However, at the time of inspection, the strategies implemented seemed to be successful in keeping bats from entering the building. Discussion was held regarding the inclusion of regular exterior maintenance checks and a formal pest sightings log that incorporates follow up actions. [s. 88. (1)]



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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 there is an organized preventive pest control program (specifically related to bats and bat bugs) in place at the home which includes records of actions taken, to be implemented voluntarily.

Issued on this 16th day of October, 2015

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

Original report signed by the inspector.