

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

Ministère de la Santé et des Soins de longue durée

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

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

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# Public Copy/Copie du public

Report Date(s) / Date(s) du apport

Inspection No / No de l'inspection Log #/ No de registre

Type of Inspection / **Genre d'inspection** 

Aug 16, 2018

2018\_539120\_0036 018457-18

Complaint

#### Licensee/Titulaire de permis

Extendicare (Canada) Inc. 3000 Steeles Avenue East Suite 103 MARKHAM ON L3R 4T9

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

Extendicare St. Catharines 283 Pelham Road St. Catharines ON L2S 1X7

# 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): July 30, 2018

A complaint was received related to excessive heat in the home.

During the course of the inspection, the inspector(s) spoke with the administrator, environmental services supervisor, residents and registered staff.

During the course of the inspection, the inspector toured the building, took temperature and humidity readings, reviewed temperature and humidity logs, hot weather and illness prevention and management policy and procedures, resident clinical records and heat stress assessments.

The following Inspection Protocols were used during this inspection: Personal Support Services
Safe and Secure Home

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

2 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)



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

WN #1: 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. A plan of care must be based on, at a minimum, an interdisciplinary assessment of seasonal risk relating to hot weather with respect to the resident.



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During the inspection, four residents were randomly selected to determine if their plan of care included an interdisciplinary assessment of seasonal risk relating specifically to hot weather. The RAI-MDS Co-ordinator, who was responsible for creating and updating each resident's plan of care, could not locate specific heat risk related interventions for two of the residents below during the inspection.

- 1. Resident #001 was assessed in April 2018, as high risk for heat stress. According to the resident's plan of care revised and updated in July 2018, a focus, goal and interventions for the resident's status with respect to heat stress was not included. The resident was assessed as high risk for heat stress due to several health conditions such as age, use of certain medications, nutritional and hydration status and other health conditions. Although each of these health conditions were identified in the plan of care, and interventions associated with them included, it was not clear exactly what health care staff were to do when environmental conditions, such as humidity and temperature, became uncomfortable and could impact the resident's health negatively for each identified condition. Under the focus of "Nutritional Intake", no interventions were included that related to heat risk and did not direct care staff as to when to increase monitoring of intake, how often to monitor and whether the intake would be documented. Under the focus of "Dehydration Risk", no information was included related to whether intake should be increased during high heat episodes. Under two other identified health conditions specific to the resident, no interventions were included related specifically to excessive heat and/or whether excessive heat and humidity could impact the resident's condition.
- 2. Resident #002 was assessed in March 2018, as high risk for heat stress. According to the resident's plan of care revised and updated in June 2018, a focus, goal and interventions for the resident's status with respect to heat stress was not included. The resident was assessed as high risk for heat stress due to several health conditions such as use of certain medications, nutritional risk and other specific health conditions. Although each of these health conditions were identified in the plan of care, and interventions associated with them included, it was not clear exactly what staff were to do when environmental conditions, such as humidity and temperature, became uncomfortable and could impact the resident's health negatively for each identified condition.

Under an identified health condition, interventions included the need to monitor urine intake and output, voiding patterns and fluid consumption in their software database, but it did not identify whether the monitoring needed to increase or change in any way if



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environmental conditions changed (increase in air temperature and humidity). Under the "Nutritional Risk" focus, interventions were missing in relation to heat risk specific time periods or whether heat and humidity would impact the resident in any way. Under a different specified health condition, it was unclear if the condition was still a concern, as the last revision was dated May 2018. No information was included as to whether the condition needed to be monitored differently during heat risk specific time periods or whether heat and humidity would impact the resident in any way. [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 to ensure that at a plan of care is based on, at a minimum, an interdisciplinary assessment of seasonal risk relating to hot weather with respect to the resident, to be implemented voluntarily.

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 has failed to ensure that the written hot weather related illness prevention and management plan met the needs of the residents and was developed in accordance with prevailing practices and implemented when required to address the adverse effects on residents related to heat.

Prevailing practices are generally accepted widespread practices which are used to make decisions. The Ministry of Health and Long Term Care developed a guidance



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document entitled "Guidelines for the Prevention and Management of Hot Weather Related Illness in Long Term Care Homes, 2012", which was shared with all Long Term Care Homes in 2012. The guidance document includes information with respect to monitoring the internal building environment when outdoor conditions exceed a temperature of 25 degrees Celcius (C) and interventions to reduce heat related illness and to reduce heat in the building when the Humidex reaches 30 [some discomfort will begin at this level]. The Humidex is an index number that is used to describe how the weather feels to the average person and is determined when the effect of heat and humidity are combined. This is to ensure that cooling systems or other cooling alternatives in the building are functional and able to provide relief to residents in certain designated areas should they require it. The guidance document also includes information with respect to enhanced resident symptom monitoring related to excessive heat.

Heat warnings were issued for the Province of Ontario, including Niagara region, beginning on June 17, 2018, when the Humidex approached or exceeded 40. Values over a Humidex of 35 were experienced on June 17, 18, 29, 30, July 1-5, 2018, at which time designated cooling areas, which include dining rooms and common spaces, must be available to residents if a home's central air conditioning system is not adequate, functional or has not been provided.

A complaint was received in July 2018, that a resident's room was uncomfortably warm and that the incremental air conditioning unit (self contained, through the wall heating and cooling system for smaller zones) in the resident's room was not working as of a specified dater in June 2018. No specific heat-related health effects were reported by the complainant other than the resident was uncomfortable and could not get any relief. The complainant identified that the common areas and corridors felt similar and that there was not much of a difference between the dining room, sitting area or the corridors on the first floor on June 30 and July 1, 2018. According to the Environmental Services Supervisor (ESS), the resident's thermostat for the incremental unit failed and was repaired on July 3, 2018. No specific air temperatures could be provided by the complainant to determine extent of the heat reported.

During the inspection, the ESS provided two separate policies related to hot weather, which were reviewed to determine compliance with this section. The first was entitled "Hot Weather Policy and Related Protocols" (Tab 4 Sec 4 Pol 1) dated July 2018, and included a policy statement that "consideration will be given whenever the external temperatures are greater than 38C or when heat advisory warnings are in effect in the



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Niagara Region". A procedure for maintenance staff was to "implement routine checks to assess indoor temperatures and Humidex levels twice daily, day and evening". How the Humidex would be calculated and what instruments would be used to take air temperature and humidity readings was not specified in the plan and the threshold to begin monitoring at 38C was not in accordance with the above noted Ministry guidelines. The second policy was entitled "Preventing Heat-Related Illness (RC-08-01-04) dated April 2017. It included similar information as the first policy, with the same 38C threshold, but the procedures for the charge nurse included the implementation of heat related illness prevention strategies when the "temperature is greater than 26C with greater than 50% humidity" [Humidex 30] or "28C and less than 50% humidity" [Humidex of 30 begins at 35% humidity and 28C]. When the two policies were presented to the ESS, the contradictory information was acknowledged and the ESS stated that they had followed the direction to begin monitoring the building when outdoor temperatures reached 38C. The second policy also included the use of a Psychrometer or Hygrometer to measure air temperatures and humidity. The availability of a Psychrometer was confirmed during the inspection and was used in combination with the inspector's digital hygrometer to measure air temperatures and humidity. The two instruments were noted to record similar temperature values, but the Psychrometer was very sensitive and had higher humidity values. At the time of inspection, the indoor values for the first floor dining room and lounge were 24C with 50% humidity (Humidex 28) and outdoor values were 25C with 61% humidity (Humidex 30).

During an inspection on July 30, 2018, a tour of the home was made and noted that the home was not equipped with a single roof top central air conditioning system, but several different systems. The dining room on the first floor was equipped with six incremental units, the lounge on the first floor had three incremental air conditioning units in addition to a system connected to a roof top air conditioning unit. The ESS confirmed that all of the systems in the home were known as single stage cooling units. According to any manufacturer of commercial air conditioning units, the difference between a single stage and a two-stage cooling unit is the type of compressor used. Single stage compressors are not very efficient when outdoor temperature and humidity levels are extreme and are only able to operate on one level of speed. A two-stage cooling system operates at two different speeds, and will adjust depending on the outdoor values and have better dehumidification. When relative humidity and temperatures rise, the two-stage compressor responds, immediately adjusting its output to the higher speed to keep up with demand. A new two stage cooling unit was installed on August 9, 2018, which would service the central sitting areas on each floor.



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The temperature and humidity records provided by the ESS between June 29 and July 5, 2018, were reviewed. According to the records, no air temperatures or humidity levels were recorded on July 1, 2018, and the values recorded June 29 to July 5, 2018, were in the uncomfortable range. No records were kept prior to June 29, 2018, as the ESS stated their policy specified that monitoring was not necessary until outdoor air temperatures reached 38C. Values were recorded by maintenance staff using a hand held digital Psychrometer while walking around the rooms being measured. The person who took the readings on June 30 and July 2, 2018, was not available for interview to determine how long the instrument was held in each space measured. The values were taken of the first and second floor dining rooms and lounges twice per day either at 0800, 1100, 1245 or 1600 hours. The Humidex ranged 28-40. The higher Humidex values were recorded in spaces that were fully occupied (dining rooms). According to Environment Canada's climate data for the St. Catharines region between June 29 and July 5, 2018, Humidex values outdoors were 31-43 between 0800 hours and 1600 hours. The difference between indoor and outdoor areas was minimal. Although air temperatures were approximately 5-8C lower indoors, the humidity levels were 10-20% higher inside during this time period than they were outdoors, contributing to a feeling of discomfort. The designated cooling areas, which were identified as the dining rooms, did not appear to have been much cooler than outdoors based on the documentation provided.

The licensee's hot weather related illness prevention and management plan was not developed in accordance with prevailing practices and implemented when required to address the adverse effects on residents related to heat. The two plans provided by the licensee were not developed in accordance with the "Guidelines for the Prevention and Management of Hot Weather Related Illness in Long Term Care Homes, 2012", related to the monitoring of the designated cooling areas with respect to the Humidex and what steps or actions needed to be taken if the existing cooling systems could not provide adequate cooling in the required designated spaces. Neither of the licensee's two plans included any references to the Ministry guidelines. [s. 20. (1)]



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Issued on this 10th day of September, 2018

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

Original report signed by the inspector.