



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

**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**

**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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<b>Report Date(s) / Date(s) du apport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Sep 1, 2015	2015_346133_0030	O-001766-15	Follow up

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**Licensee/Titulaire de permis**

OMNI HEALTH CARE LIMITED PARTNERSHIP  
1840 LANSDOWNE STREET WEST UNIT 12 PETERBOROUGH ON K9K 2M9

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

GARDEN TERRACE  
100 Aird Place KANATA ON K2L 4H8

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

JESSICA LAPENSEE (133)

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

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

This inspection was conducted on the following date(s): August 26th and 28th, 2015

During the course of the inspection, the inspector(s) spoke with the Administrator, the Nursing Administrative Services Manager, and registered and non registered nursing staff.

Over the course of the inspection, at applicable doors, the inspector verified that the doors were equipped with an audible door alarm that only allowed calls to be cancelled at the point of activation, and that the door alarm was connected to the resident-staff communication and response system.

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

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

1 WN(s)

0 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
O.Reg 79/10 s. 9. (1)	CO #002	2015_289550_0004		133



**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. 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:**

**1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be,**

- i. kept closed and locked,**
- ii. equipped with a door access control system that is kept on at all times, and**
- iii. equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,**

**A. is connected to the resident-staff communication and response system, or**

**B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door. O. Reg. 79/10, s. 9. (1).**

**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).**

**3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.**

**4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).**

### **Findings/Faits saillants :**

1. On August 26th, 2015, Inspector #133 and # 623 began a follow up inspection at the home, in order to assess compliance with door alarm requirements, as per O. Reg. 79/10, s. 9 (1) 1 iii. At approximately 11:20am, at the main entrance, the inspectors attempted to elicit an audible alarm at the front door by opening it and then not allowing it to close. The inspectors were unable to elicit an audible alarm, yet a Personal Support Worker's pager (staff #S100), in inspector #133's possession, received notification of an active alarm at the front door. Another Personal Support Worker, staff #S101, from the 1 West unit, came to check the front door and showed the inspectors that her pager had received notification of an active alarm at the front door. The Registered Practical Nurse

at the 1st floor nurse station was also in possession of a pager and it too registered an active alarm at the front door. Staff and visitors in the immediate area informed the inspectors that normally, if the front door is open for too long, there is an audible alarm. The Nursing Administrative Services Manager (NASM) was called by the 1st floor unit RPN, and by approximately 11:50am, it had been determined that the front door alarm was on bypass. The NASM showed the inspectors a bypass panel at the 1st floor nurse station, and the toggle associated with the front door, marked as “lobby”, had been flipped to the off position. It could not be determined who had bypassed the front door alarm, or when it had been bypassed. The front door alarm was reactivated by flipping the “lobby” toggle to the right. Inspector #623 went back to the front door, opened it, and did not allow it to close. An audible alarm sounded after approximately 60 seconds. Inspector #133 flipped the “lobby” toggle at the bypass panel to the left, and the sounding alarm was silenced. The home’s Administrator was also present for this testing, and she advised that the home’s alarm company would be called in immediately. As per O. Reg. 79/10, s. 9 (1) 1 iii, an audible door alarm must only allow calls to be cancelled at the point of activation, which is the door. The bypass panel is not the point of activation.

Inspectors #133 and # 623 tested all other applicable doors in the home and found them all to be compliant. Audible door alarms could only be cancelled at the point of activation, in that the bypass toggles at the panel in the 1st floor nurse station associated with all other doors tested did not serve to silence a sounding alarm. Staff pagers received notification of activated alarms as expected.

On August 28th, 2015, in the company of the Administrator, Inspector #133 observed that a wooden box had been constructed over the bypass panel in the 1st floor nurses’ station, and it was locked with a padlock. The Administrator and the inspector retrieved the key, from a secured location, and the box was opened. The Administrator proceeded to open the front door and prevented it from closing, thereby eliciting an audible alarm. Inspector #133 flipped the “lobby” toggle to the left, and noted that it no longer silenced the active alarm. At the time of observation, the front door alarm could only be cancelled at the point of activation, and access to the bypass panel had been restricted. [s. 9. (1)]



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**Issued on this 1st day of September, 2015**

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

**Original report signed by the inspector.**