



**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**

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**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
performance et de la conformité**

**Public Copy/Copie du public**

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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Nov 5, 2013	2013_246196_0017	S-000081-13	Critical Incident System

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**Licensee/Titulaire de permis**

**GERALDTON DISTRICT HOSPITAL  
500 HOGARTH AVENUE WEST, GERALDTON, ON, P0T-1M0**

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

**GERALDTON DISTRICT HOSPITAL  
500 HOGARTH AVENUE WEST, GERALDTON, ON, P0T-1M0**

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

**LAUREN TENHUNEN (196)**

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

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**The purpose of this inspection was to conduct a Critical Incident System inspection.**

**This inspection was conducted on the following date(s): October 28, 29, 2013**

**During the course of the inspection, the inspector(s) spoke with the Director of Care (DOC), Nurse Manager, Registered Practical Nurses (RPN), Personal Support Workers (PSW), Residents and Family members**

**During the course of the inspection, the inspector(s) conducted a tour of resident care areas, observed staff to resident interactions, reviewed various home policies, reviewed the health care records of several residents**

**The following Inspection Protocols were used during this inspection:  
Falls Prevention**

**Findings of Non-Compliance were found during this inspection.**

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**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

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**Legend**

**WN – Written Notification  
VPC – Voluntary Plan of Correction  
DR – Director Referral  
CO – Compliance Order  
WAO – Work and Activity Order**

**Legendé**

**WN – Avis écrit  
VPC – Plan de redressement volontaire  
DR – Aiguillage au directeur  
CO – Ordre de conformité  
WAO – Ordres : travaux et activités**

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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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 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.

Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

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**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 87.  
Housekeeping**

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

**s. 87. (2) As part of the organized program of housekeeping under clause 15 (1) (a) of the Act, the licensee shall ensure that procedures are developed and implemented for,**

**(b) cleaning and disinfection of the following in accordance with manufacturer's specifications and using, at a minimum, a low level disinfectant in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices:**

**(i) resident care equipment, such as whirlpools, tubs, shower chairs and lift chairs,**

**(ii) supplies and devices, including personal assistance services devices, assistive aids and positioning aids, and**

**(iii) contact surfaces; O. Reg. 79/10, s. 87 (2).**

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**Findings/Faits saillants :**



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1. In October 2013, during the course of the inspection, dried feces was observed on the inside of the raised toilet seat in the shared washroom of a resident room. The following morning, this same raised toilet seat was noted to have the same dried feces in place as had been observed the afternoon before.

As part of the organized program of housekeeping under clause 15 (1) (a) of the Act, the licensee failed to ensure that procedures are developed and implemented for, (b) cleaning and disinfection of the following in accordance with manufacturer's specifications and using, at a minimum, a low level disinfectant in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices: (i) resident care equipment, such as whirlpools, tubs, shower chairs and lift chairs [s. 87. (2) (b)]

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**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 91. Every licensee of a long-term care home shall ensure that all hazardous substances at the home are labelled properly and are kept inaccessible to residents at all times. O. Reg. 79/10, s. 91.**

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**Findings/Faits saillants :**

1. While conducting a tour of the resident home areas, a spray bottle of disinfectant cleaner labelled "Virex 256" was found in the unlocked cupboard of the unlocked tub room. In addition, a bottle of "Universal Total cleaner and Polish" was found in the unlocked cupboard under the sink in the resident dining room.

The licensee failed to ensure that all hazardous substances at the home are labelled properly and are kept inaccessible to residents at all times. [s. 91.]

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**WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 129. Safe storage of drugs**



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Specifically failed to comply with the following:

- s. 129. (1) Every licensee of a long-term care home shall ensure that,
- (a) drugs are stored in an area or a medication cart,
    - (i) that is used exclusively for drugs and drug-related supplies,
    - (ii) that is secure and locked,
    - (iii) that protects the drugs from heat, light, humidity or other environmental conditions in order to maintain efficacy, and
    - (iv) that complies with manufacturer's instructions for the storage of the drugs; and O. Reg. 79/10, s. 129 (1).
  - (b) controlled substances are stored in a separate, double-locked stationary cupboard in the locked area or stored in a separate locked area within the locked medication cart. O. Reg. 79/10, s. 129 (1).

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**Findings/Faits saillants :**

1. While conducting a tour of the resident home areas, a tube of prescription cream, labelled by the pharmacy, was found in the washroom of a resident room, which is shared by a chronic care patient and long-term care resident.

The licensee failed to ensure that, (a) drugs are stored in an area or a medication cart, (i) that is used exclusively for drugs and drug-related supplies, (ii) that is secure and locked, [s. 129. (1) (a) (ii)]

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Issued on this 5th day of November, 2013

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

*Lauren Enkunen #196.*