

Ministère des Soins de longue durée

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

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

Long-Term Care Operations Division Long-Term Care Inspections Branch

Division des opérations relatives aux soins de longue durée Inspection de soins de longue durée

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Public Copy/Copie du rapport public

Report Date(s) / Date(s) du Rapport No de l'inspection

Inspection No /

Loa #/ No de registre Type of Inspection / **Genre d'inspection**

Aug 10, 2021

2021_796754_0020 023610-20

Follow up

Licensee/Titulaire de permis

Corporation of the County of Grey 595 9th Avenue East Owen Sound ON N4K 3E3

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

Grey Gables Home for the Aged 206 Toronto Street South Markdale ON NOC 1H0

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

TAWNIE URBANSKI (754)

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): July 27-29, 2021.

The following intake was completed during this follow up inspection: log #023610-20, a follow up related to the home's head injury routine policy.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Registered Practical Nurse (RPN), Personal Support Worker (PSW), and a Housekeeper.

The inspector(s) also toured resident home areas, observed dining, resident to staff interactions, and reviewed relevant resident clinical records, infection prevention and control practices (IPAC) practices and the home's relevant policies.

The following Inspection Protocols were used during this inspection: Falls Prevention Infection Prevention and Control Safe and Secure Home

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)

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:



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REQUIREMENT/ EXIGENCE			INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 8. (1)	CO #002	2020_821640_0022	754

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES			
Legend	Légende		
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. 21. Air temperature



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Specifically failed to comply with the following:

s. 21. (3) The temperature required to be measured under subsection (2) shall be documented at least once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night. O. Reg. 79/10, s. 21 (3).

Findings/Faits saillants:

1. The licensee failed to ensure that air temperatures were measured and documented in writing in at least two resident bedrooms in different parts of the home, one resident common area on every floor of the home, and every designated cooling area of the home, at all specified times required.

As of May 15, 2021, Ontario Regulation 79/10 included additional amendments related to cooling requirements and air temperatures in the LTC home.

A review of temperature records was completed from July 1 to 15, 2021. It showed the following:

- A) Air temperatures were not measured or documented for any of the required areas of the home during the evenings or nights from July 1 to 15, 2021.
- B) Air temperatures were not measured or documented at any of the required times for resident common areas of the home from July 1 to 15, 2021.
- C) Only one out of two designated cooling areas of the home had air temperatures measured during the mornings and afternoons between 12 p.m. and 5 p.m from July 1 to 15, 2021.

Director of Care (DOC) #101 said no other temperatures were measured and documented for the home from July 1, to 15, 2021.

By not measuring and documenting air temperatures of the home, as required, the home would be unable to identify when a temperature related concern occurs. This may have put residents at risk for a temperature related illness.

Sources: record of the home's documented air temperatures, and interview with the DOC #101. [s. 21. (3)]



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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 the air temperature is measured and documented in writing, in at least two resident bedrooms in different parts of the home, one resident common area on every floor of the home, and every designated cooling area of the home at least once every morning, once every afternoon between 12 p.m. and 5 p.m., and once every evening or night, and that a record of the measurements are kept, to be implemented voluntarily.

Issued on this 12th day of August, 2021

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

Original report signed by the inspector.