



**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
performance et de la conformité**

Hamilton Service Area Office
119 King Street West 11th Floor
HAMILTON ON L8P 4Y7
Telephone: (905) 546-8294
Facsimile: (905) 546-8255

Bureau régional de services de
Hamilton
119 rue King Ouest 11^{ième} étage
HAMILTON ON L8P 4Y7
Téléphone: (905) 546-8294
Télécopieur: (905) 546-8255

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Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Oct 5, 2015	2015_189120_0078	H-002863-15 & H-003304-15	Complaint

Licensee/Titulaire de permis

DEEM MANAGEMENT SERVICES LIMITED
2 QUEEN STREET EAST SUITE 1500 TORONTO ON M5C 3G5

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

HAMILTON CONTINUING CARE
125 WENTWORTH STREET SOUTH HAMILTON ON L8N 2Z1

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

BERNADETTE SUSNIK (120)

Inspection Summary/Résumé de l'inspection



The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): September 30, 2015

Two complaints were reviewed, one related to Scabies control measures implemented between June 4 and July 8, 2015 and one related to odours in the home.

During the course of the inspection, the inspector(s) spoke with the Administrator, maintenance person, housekeeper and personal support workers.

During the course of the inspection, the inspector toured the building and random resident bedrooms and reviewed infection prevention and control procedures and odour control procedures.

**The following Inspection Protocols were used during this inspection:
Accommodation Services - Housekeeping
Infection Prevention and Control**

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. 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, (d) addressing incidents of lingering offensive odours. O. Reg. 79/10, s. 87 (2).

Findings/Faits saillants :

1. The licensee did not ensure that procedures were implemented to address incidents of lingering offensive odours.



1) On September 30, 2015 lingering odours were noted upon exiting the elevator on the 2nd floor and were stronger towards a housekeeping utility room at the end of one corridor. The odour resembled a mixture of a wet mop and mild sewer gas. Staff working at the time of the inspection confirmed that the odour was the same odour that they had smelled several weeks ago but that it was much worse at the time. A complaint was forwarded to the Ministry of Health Action line on September 20, 2015 identifying that odours were "musty" or resembled the smell of mould and that it was "terrible" in the basement and 2nd floor and that building occupants were having "throat problems". The report further identified that discussions were held at the home about the problems but no action had been taken. After a tour of the building and interviews with the maintenance person and housekeeping staff, it was determined that the source of the odour was most likely a dried out drain trap for a utility sink in a housekeeping room. The water normally present in P traps or S traps under a sink will evaporate without normal use. The result may cause odours to migrate up from connecting sanitary lines into a room. The housekeeper reported that the sink was not used often. The sink faucet was observed to be hooked up to hoses which when turned on did not empty out into the sink drain, but into a floor bucket. The maintenance person reported that he was on vacation September 1-23, 2015 and did not allocate his usual duties of pouring water down drains to other staff throughout the building, including the basement and that he had not had the opportunity to date to continue the process. No written drain maintenance procedures were available at the home for review.

2) Offensive lingering urine odours were noted on the 3rd floor upon exiting the elevator. The odour appeared to be emanating from the carpeted area in front of the elevator and down a short corridor which appeared dirty. According to the Administrator, the carpet was due to be replaced with smooth sheet flooring before the end of the year. Cleaning frequencies and thoroughness was discussed in order to maintain the carpet odour and stain free until it could be replaced.

The licensee's procedure titled "Odours" HKLD-05-03-08 dated September 2013 required that odours be identified, eliminated and monitored to determine if the intervention implemented was successful. A monitoring "tool" was included with the procedure for staff to complete when an unacceptable odour was identified which was to be provided to the Administrator for follow-up. The monitoring tool and associated form was not completed or followed to address the lingering odours related to both issues identified above. [s. 87(2)(d)]



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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 procedures are implemented to address incidents of lingering offensive odours, to be implemented voluntarily.

Issued on this 5th day of October, 2015

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

Original report signed by the inspector.