



**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**

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

**Division des foyers de soins de
longue durée
Inspection de soins de longue durée**

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 11ième étage
HAMILTON ON L8P 4Y7
Téléphone: (905) 546-8294
Télécopieur: (905) 546-8255

Public Copy/Copie du public

Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Oct 17, 2017	2017_539120_0054	011328-17	Follow up

Licensee/Titulaire de permis

Schlegel Villages Inc
325 Max Becker Drive Suite 201 KITCHENER ON N2E 4H5

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



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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): October 4, 2017

A complaint inspection (2017-539120-0030) was previously conducted on May 10, 11 and 29, 2017, and Order #002 was issued to the licensee on May 30, 2017, related to their maintenance program. The compliance due date for the order was July 31, 2017. For this follow-up inspection, the conditions in the order have not all been met and a second order is being issued.

During the course of the inspection, the inspector(s) spoke with the administrator, maintenance person, housekeeping/laundry supervisor and registered and non-registered staff.

During the course of the inspection, the inspector toured the building, including the kitchen, laundry area and resident rooms and reviewed maintenance records.

**The following Inspection Protocols were used during this inspection:
Accommodation Services - Maintenance**

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

1 WN(s)

0 VPC(s)

1 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 LTCHA, 2007 S.O. 2007, c.8, s. 15. Accommodation services
Specifically failed to comply with the following:

- s. 15. (2) Every licensee of a long-term care home shall ensure that,**
- (a) the home, furnishings and equipment are kept clean and sanitary; 2007, c. 8, s. 15 (2).**
 - (b) each resident's linen and personal clothing is collected, sorted, cleaned and delivered; and 2007, c. 8, s. 15 (2).**
 - (c) the home, furnishings and equipment are maintained in a safe condition and in a good state of repair. 2007, c. 8, s. 15 (2).**



Findings/Faits saillants :

1. The licensee did not ensure that the home was maintained in a safe condition and in a good state of repair.

On May 30, 2017, Order #002 was issued to the licensee to conduct an audit of all areas of the building to determine the condition of interior and exterior walls, ceilings, exterior and interior doors, furnishings, window sills, window and door trim, baseboards and flooring material. Further the licensee was to establish a schedule to repair, replace or re-paint the surfaces that were identified during the inspection (as identified by the inspector) and what was identified by the staff during their audit conducted June 13, 2017. The repairs were to be completed no later than July 31, 2017.

During this follow-up inspection, a tour of the building was conducted and several maintenance related issues were identified that remained outstanding from Order #002. These included inspector identified issues and those identified by the licensee in a building audit that was dated June 13, 2017;

*The flooring material in the second floor shower area had uneven areas and was cracked.

*The flooring material in the third floor shower area had a two inch length split.

*The wall paint was peeling heavily in the first floor dining room and sitting room (which is also used as a dining room) and the plaster was cracked or loose on a wall area under a window in the sitting room.

*The wall under one window had large plaster cracks in the second floor dining area.

The licensee did not include in their original maintenance audit either the kitchen or laundry area and did not identify the following maintenance related issues:

*The kitchen flooring material was split in multiple areas around the cooking zone of the kitchen. A patch work quilt of various cut out pieces of flooring material with split seams was noted in various areas in and around the cook's work station. The disrepair was identified by the inspector on inspection report 2015-201167-0009 completed in June 2015 and remained outstanding.

*The laundry flooring material, located upon entry of the room and in front of the dryers, was badly eroded, with fragments of hard vinyl tile breaking apart and tiles missing. The flooring was uneven and could not be adequately cleaned. The condition was previously



identified by the inspector on inspection report 2014-189120-0019 dated May 14, 2014, and the condition appeared to have deteriorated further with no interventions.

*The flooring material in two identified resident bedrooms was comprised of strips of vinyl about 10 cm wide and glued down to a sub floor. In both rooms, the strips had shifted or become loose and some heaved together, causing them to raise up to create a trip hazard. The maintenance person was aware of the issue.

*The 3rd floor dining room ceiling was observed with holes where old light fixtures were removed (over 8 months prior).

*The 2nd floor common washroom door was badly damaged along the bottom third of the door, with exposed gouged wood and peeling paint. The door was not in any condition to be easily cleaned.

*The surface of the room entrance door to room #101 was covered in peeling paint and difficult to clean.

The maintenance person stated that the flooring repairs for the showers, kitchen, laundry and resident bedrooms were not part of their plans to be addressed in 2017, and were not included in the scope of work for a contractor that was hired on August 21, 2017 to complete wall and flooring repairs in the home. The painting and wall/door repairs in the home were being addressed at the time of inspection by the contractor but an expected date of completion could not be provided. [s. 15. (2) (c)]

Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".

Issued on this 17th day of October, 2017

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



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Original report signed by the inspector.



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Order(s) of the Inspector

Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007, S.O. 2007, c.8*

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée, L.O. 2007, chap. 8*

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Inspection de soins de longue durée**

Public Copy/Copie du public

Name of Inspector (ID #) /

Nom de l'inspecteur (No) : BERNADETTE SUSNIK (120)

Inspection No. /

No de l'inspection : 2017_539120_0054

Log No. /

No de registre : 011328-17

Type of Inspection /

Genre d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : Oct 17, 2017

Licensee /

Titulaire de permis : Schlegel Villages Inc
325 Max Becker Drive, Suite 201, KITCHENER, ON,
N2E-4H5

LTC Home /

Foyer de SLD : HAMILTON CONTINUING CARE
125 WENTWORTH STREET SOUTH, HAMILTON, ON,
L8N-2Z1

Name of Administrator /

**Nom de l'administratrice
ou de l'administrateur :** Enesia Malapela

To Schlegel Villages Inc, you are hereby required to comply with the following order(s)
by the date(s) set out below:

Order # /
Ordre no : 001 **Order Type /**
Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Linked to Existing Order /
Lien vers ordre 2017_539120_0030, CO #002;
existant:

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 15. (2) Every licensee of a long-term care home shall ensure that,
(a) the home, furnishings and equipment are kept clean and sanitary;
(b) each resident's linen and personal clothing is collected, sorted, cleaned and delivered; and
(c) the home, furnishings and equipment are maintained in a safe condition and in a good state of repair. 2007, c. 8, s. 15 (2).

Order / Ordre :

The licensee shall complete the following:

1. Replace the flooring material in the shower areas of both the 2nd and 3rd floor shower areas, the kitchen (cooking area) and laundry room so that it is smooth, tight-fitting, non-porous and easy to clean by March 30, 2018.
2. Repair or replace the flooring material in the two identified resident bedrooms so that the material is tight-fitting, non-porous and easy to clean by November 20, 2017.
3. All wall, ceiling and door repairs and painting identified by the inspector and staff of the home as summarized in the audit completed on June 13, 2017, shall be completed by November 30, 2017.

Grounds / Motifs :

1. The licensee did not ensure that the home was maintained in a safe condition and in a good state of repair.

On May 30, 2017, Order #002 was issued to the licensee to conduct an audit of all areas of the building to determine the condition of interior and exterior walls, ceilings, exterior and interior doors, furnishings, window sills, window and door

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trim, baseboards and flooring material. Further the licensee was to establish a schedule to repair, replace or re-paint the surfaces that were identified during the inspection (as identified by the inspector) and what was identified by the staff during their audit conducted June 13, 2017. The repairs were to be completed no later than July 31, 2017.

During this follow-up inspection, a tour of the building was conducted and several maintenance related issues were identified that remained outstanding from Order #002. These included inspector identified issues and those identified by the licensee in a building audit that was dated June 13, 2017;

*The flooring material in the second floor shower area had uneven areas and was cracked.

*The flooring material in the third floor shower area had a two inch length split.

*The wall paint was peeling heavily in the first floor dining room and sitting room (which is also used as a dining room) and the plaster was cracked or loose on a wall area under a window in the sitting room.

*The wall under one window had large plaster cracks in the second floor dining area.

The licensee did not include in their original maintenance audit either the kitchen or laundry area and did not identify the following maintenance related issues:

*The kitchen flooring material was split in multiple areas around the cooking zone of the kitchen. A patch work quilt of various cut out pieces of flooring material with split seams was noted in various areas in and around the cook's work station. The disrepair was identified by the inspector on inspection report 2015-201167-0009 completed in June 2015 and remained outstanding.

*The laundry flooring material, located upon entry of the room and in front of the dryers, was badly eroded, with fragments of hard vinyl tile breaking apart and tiles missing. The flooring was uneven and could not be adequately cleaned. The condition was previously identified by the inspector on inspection report 2014-189120-0019 dated May 14, 2014, and the condition appeared to have deteriorated further with no interventions.

*The flooring material in two identified resident bedrooms was comprised of strips of vinyl about 10 cm wide and glued down to a sub floor. In both rooms, the strips had shifted or become loose and some heaved together, causing them



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to raise up to create a trip hazard. The maintenance person was aware of the issue.

*The 3rd floor dining room ceiling was observed with holes where old light fixtures were removed (over 8 months prior).

*The 2nd floor common washroom door was badly damaged along the bottom third of the door, with exposed gouged wood and peeling paint. The door was not in any condition to be easily cleaned.

*The surface of the room entrance door to room #101 was covered in peeling paint and difficult to clean.

The maintenance person stated that the flooring repairs for the showers, kitchen, laundry and resident bedrooms were not part of their plans to be addressed in 2017, and were not included in the scope of work for a contractor that was hired on August 21, 2017 to complete wall and flooring repairs in the home. The painting and wall/door repairs in the home were being addressed at the time of inspection by the contractor but an expected date of completion could not be provided.

This Order is based upon three factors, severity, scope and the licensee's compliance history in keeping with section 299(1) of the Long Term Care Home Regulation 79/10. The severity is 2 (potential for minimal harm), the scope is 2 (there are more than several areas where disrepair was identified) and the compliance history is 4 (on-going non-compliance with an order). An Order was previously issued on May 30, 2017. (120)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Mar 30, 2018



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REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail, commercial courier or by fax upon:

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603



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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing, when service is made by a commercial courier it is deemed to be made on the second business day after the day the courier receives the document, and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this (these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the Director

Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.



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RENSEIGNEMENTS RELATIFS AUX RÉEXAMENS DE DÉCISION ET AUX APPELS

PRENEZ AVIS :

Le/la titulaire de permis a le droit de faire une demande de réexamen par le directeur de cet ordre ou de ces ordres, et de demander que le directeur suspende cet ordre ou ces ordres conformément à l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée.

La demande au directeur doit être présentée par écrit et signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au/à la titulaire de permis.

La demande écrite doit comporter ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le/la titulaire de permis souhaite que le directeur examine;
- c) l'adresse du/de la titulaire de permis aux fins de signification.

La demande de réexamen présentée par écrit doit être signifiée en personne, par courrier recommandé, par messagerie commerciale ou par télécopieur, au :

Directeur
a/s du coordonnateur/de la coordonnatrice en matière d'appels
Direction de l'inspection des foyers de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Toronto ON M5S 2B1
Télécopieur : 416 327-7603



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Quand la signification est faite par courrier recommandé, elle est réputée être faite le cinquième jour qui suit le jour de l'envoi, quand la signification est faite par messagerie commerciale, elle est réputée être faite le deuxième jour ouvrable après le jour où la messagerie reçoit le document, et lorsque la signification est faite par télécopieur, elle est réputée être faite le premier jour ouvrable qui suit le jour de l'envoi de la télécopie. Si un avis écrit de la décision du directeur n'est pas signifié au/à la titulaire de permis dans les 28 jours de la réception de la demande de réexamen présentée par le/la titulaire de permis, cet ordre ou ces ordres sont réputés être confirmés par le directeur, et le/la titulaire de permis est réputé(e) avoir reçu une copie de la décision en question à l'expiration de ce délai.

Le/la titulaire de permis a le droit d'interjeter appel devant la Commission d'appel et de révision des services de santé (CARSS) de la décision du directeur relative à une demande de réexamen d'un ordre ou des ordres d'un inspecteur ou d'une inspectrice conformément à l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée. La CARSS est un tribunal autonome qui n'a pas de lien avec le ministère. Elle est créée par la loi pour examiner les questions relatives aux services de santé. Si le/la titulaire décide de faire une demande d'audience, il ou elle doit, dans les 28 jours de la signification de l'avis de la décision du directeur, donner par écrit un avis d'appel à la fois à :

la Commission d'appel et de révision des services de santé et au directeur

À l'attention du/de la registrateur(e)
151, rue Bloor Ouest, 9e étage
Toronto ON M5S 2T5

Directeur
a/s du coordonnateur/de la coordonnatrice en matière
d'appels
Direction de l'inspection des foyers de soins de longue durée
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Toronto ON M5S 2B1
Télécopieur : 416 327-7603

À la réception de votre avis d'appel, la CARSS en accusera réception et fournira des instructions relatives au processus d'appel. Le/la titulaire de permis peut en savoir davantage sur la CARSS sur le site Web www.hsarb.on.ca.

Issued on this 17th day of October, 2017

**Signature of Inspector /
Signature de l'inspecteur :**



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Name of Inspector /

Nom de l'inspecteur :

BERNADETTE SUSNIK

Service Area Office /

Bureau régional de services : Hamilton Service Area Office