



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

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

**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

**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**

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

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Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
May 8, 2018	2018_539120_0019	024162-17	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



**Ministry of Health and
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**Rapport d'inspection sous la
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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): April 26, 2018

A follow up inspection (2017-539120-0054) was previously conducted in October 2017, at which time non compliance was identified to be outstanding related to maintenance services. A compliance order (#001) was issued in October 2017, to repair flooring, doors and walls in the home by the end of March 2018. During this follow-up inspection, not all conditions laid out in the compliance order were met. See below for details.

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

During the course of the inspection, the inspector toured the whole home, including resident bedrooms, ensuite washrooms, laundry, kitchen and common spaces and reviewed documentation related to scheduled flooring repairs.

**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)**
- 1 DR(s)**
- 0 WAO(s)**



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NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

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

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 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).



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

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Loi de 2007 sur les foyers de
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Findings/Faits saillants :

1. The licensee has failed to ensure that the home was maintained in a safe condition and in a good state of repair.

In June 2017, a compliance 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 independent internal audit. The repairs were to be completed no later than the end of July 2017.

During a follow-up inspection in October 2017, a tour of the building was conducted and several maintenance related issues were identified that remained outstanding from the previous compliance order issued in June 2017. They included the condition of the flooring in the second and third floor shower rooms, laundry, kitchen and two specified bedrooms, the condition of walls and ceilings in specified areas and the condition of specified bathroom doors. Another compliance order was issued with a due date for the end of March 2018.

During this follow-up inspection, the licensee addressed all outstanding repairs except for the condition of the flooring in the two shower areas and the kitchen. Specifically, the following were observed;

*The flooring material in the third floor shower area was ripped open in one area, approximately four inches long and 2 inches wide, allowing water to enter the sub floor.

*The flooring material in the second floor shower area had two areas of damaged flooring. The first area was in the shower, with an uneven depression in the floor, with a long split in the flooring material, allowing water to enter the sub floor. The second area was in front of the toilet that had a split in the flooring material that was approximately three feet in length and the area was covered in red duct tape.

*The kitchen flooring material was split and lifting in multiple areas in and around a sink and work island in the cooking zone of the kitchen. A patch work quilt of various cut out vinyl sheet flooring pieces were applied in the past in an attempt to repair the flooring material. The various pieces were observed to have become unsealed at the seams and were lifting. The floor was not smooth, easy to clean and tight-fitting.



**Ministry of Health and
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**Inspection Report under
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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
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At the time of the inspection, the General Manager reported that the repairs for the shower rooms were scheduled to begin in mid May 2018, but did not have a plan or time frame to start and complete the flooring repairs/replacement in the kitchen. [s. 15. (2) (c)]

Additional Required Actions:

***CO # - 001 will be served on the licensee. Refer to the “Order(s) of the Inspector”.
DR # 001 – The above written notification is also being referred to the Director for further action by the Director.***

Issued on this 4th day of June, 2018

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

Original report signed by the inspector.



**Ministry of Health and
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Pursuant to section 153 and/or
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**Ministère de la Santé et
des Soins de longue durée**

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

**Division des foyers de soins de longue durée
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 : 2018_539120_0019

Log No. /

No de registre : 024162-17

Type of Inspection /

Genre d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : May 8, 2018

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:



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

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

**Ministère de la Santé et
des Soins de longue durée**

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou
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de soins de longue durée*, L.O. 2007, chap. 8

Order # /

Ordre no : 001

Order Type /

Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Linked to Existing Order /

**Lien vers ordre
existant:** 2017_539120_0054, CO #001;

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 must be compliant with s. 15(2)(c) of the Long Term Care Homes Act, 2007

Specifically, the licensee shall complete the following:

1. Replace the flooring material in the 2nd and 3rd floor shower areas and in the kitchen (cooking area) so that it is smooth, tight-fitting, non-porous and easy to clean.

Grounds / Motifs :

1. The licensee failed to comply with compliance order #001 from inspection #2017-539120-0054 served on a specified date in October 2017.

The licensee was ordered to 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 the end of March 2018.
2. Repair or replace the flooring material in two identified bedrooms so that the material is tight-fitting, non-porous and easy to clean by a specified date in



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

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

**Ministère de la Santé et
des Soins de longue durée**

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

November 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 a specified date in June 2017, shall be completed by the end of November 2017.

The licensee completed items #2 and #3, however the licensee failed to complete item #1 to replace the flooring material in the two shower areas and in the kitchen.

During the follow-up inspection, specifically, the following was observed;

*The flooring material in the third floor shower area was ripped open in one area, approximately four inches long and 2 inches wide, allowing water to enter the sub floor.

*The flooring material in the second floor shower area had two areas of damaged flooring. The first area was in the shower, with an uneven depression in the floor, with a long split in the flooring material, allowing water to enter the sub floor. The second area was in front of the toilet that had a split in the flooring material that was approximately three feet in length and the area was covered in red duct tape.

*The kitchen flooring material was split and lifting in multiple areas in and around a sink and work island in the cooking zone of the kitchen. A patch work quilt of various cut out vinyl sheet flooring pieces were applied in the past in an attempt to repair the flooring material. The various pieces were observed to have become unsealed at the seams and were lifting. The floor was not smooth, easy to clean and tight-fitting.

At the time of the inspection, the General Manager reported that the repairs for the shower rooms were scheduled to begin mid May 2018, but did not have a plan or time frame to start and complete the flooring repairs/replacement in the kitchen.

This compliance order is based upon three factors where there has been a finding of non compliance in keeping with s.299(1) of Ontario Regulation 79/10. The factors include scope, severity and history of non-compliance. In relation to s.15(2)(c) of the Long Term Care Homes Act, the severity of this issue was determined to be a level 2 as the uneven flooring material may pose a safety risk. The scope of the issue was a level 2 as the condition was identified in more



**Ministry of Health and
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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

**Ministère de la Santé et
des Soins de longue durée**

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

than one location. The history of non-compliance is a level 4 as the history of non-compliance was on-going and included;

Compliance Order #002 made under s.15(2) of the LTCHA, June 2017, #2017-539120-0030 with a compliance date of July 2017, and;

Compliance Order #001 made under s.15(2) of the LTCHA, October 2017,
#2017-539120-0054 with a compliance date of March 2018.
(120)

This order must be complied with /

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



**Ministry of Health and
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Order(s) of the Inspector

Pursuant to section 153 and/or
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Homes Act, 2007*, S.O. 2007, c.8

**Ministère de la Santé et
des Soins de longue durée**

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

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



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

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

**Ministère de la Santé et
des Soins de longue durée**

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

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.



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

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

**Ministère de la Santé et
des Soins de longue durée**

Ordre(s) de l'inspecteur

Aux termes de l'article 153 et/ou
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de soins de longue durée*, L.O. 2007, chap. 8

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



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

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

**Ministère de la Santé et
des Soins de longue durée**

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

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 8th day of May, 2018

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



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**Ministère de la Santé et
des Soins de longue durée**

Ordre(s) 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