

Ministry of Health and Long-Term Care

Inspection Report under the Long-Term Care Homes Act, 2007 Ministère de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

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

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Public Copy/Copie du public

Date(s) of inspection/Date(s) de Inspecti l'inspection

Inspection No/ No de l'inspection

Type of Inspection/Genre d'inspection

Oct 26, 27, 28, 2011

2011 054133 0024

Follow up

Licensee/Titulaire de permis

HILLTOP MANOR NURSING HOME LIMITED 82 Colonel By Crescent, Smiths Falls, ON, K7A-5B6

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

HILLTOP MANOR NURSING HOME LIMITED

1005 ST LAWRENCE STREET, P.O. BOX 430, MERRICKVILLE, ON, KOG-1NO

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

JESSICA LAPENSEE (133)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, the Director of Property Services and the Assisstant Director of Property Services, a Registered Practical Nurse and Personal Support Workers.

During the course of the inspection, the inspector(s) observed the V3 portable ceiling lift units in use, observed the portable ceiling lift unit battery charging systems that were in use and observed the lifting slings found on the ceiling lift carts. The inspector also reviewed documentation related to the daily of use of the portable ceiling lift units.

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

Findings of Non-Compliance were found during this inspection.

## NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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Legend	Legendé		
CO - Compliance Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités		
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)	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 subsections:

- 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).

## Findings/Faits saillants:

1. The home initiated a monthly inspection program for the mechanical lift slings in accordance with manufacturer specifications in July 2011. All slings in the home were inspected on July 27, 2011. There has been no subsequent sling inspections conducted.

The home uses BHM Medical V3 portable ceiling lifts. In the Operating Manual for these ceiling lifts it is indicated that when the red light appears on the front panel, between the up and down buttons, the lift requires service. On October 26th, 2011 the inspector observed that the red light illuminated when the up or down buttons were depressed on lift #2. Staff indicated to the inspector that this lift had been in use that day. Documentation produced by staff using lift #2 indicates that the red light was illuminated when the lift was used on October 24th and 25th as well. There was no follow up action taken in response to the indicator that the lift unit required service.

Documentation produced by staff using portable ceiling lift #E3 indicates that the red light was illuminated when the lift was used between September 14th and September 19th 2011. For the same lift, it is documented that the red light was illuminated when the lift was in use between September 21st and September 23rd 2011. There is no noted follow up action taken during these time periods in response to the indicator that the lift unit required service until it was replaced with lift unit #2 on September 23, 2011.

## Additional Required Actions:

CO # - 901 was served on the licensee. Refer to the "Order(s) of the Inspector".

THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/ LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT CONFORME AUX EXIGENCES:



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CORRECTED NON-COMPLIANCE/ORDER(S) REDRESSEMENT EN CAS DE NON-RESPECT OU LES ORDERS:				
REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / NO DE L'INSPECTION	INSPECTOR ID #/ NO DE L'INSPECTEUR	
O.Reg 79/10 r. 90.	CO #002	2011_054133_0003	133	

Issued on this 1st day of November, 2011

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

Jessica Lapenséa