



**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 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**

Central West Service Area Office
500 Weber Street North
WATERLOO ON N2L 4E9
Telephone: (888) 432-7901
Facsimile: (519) 885-9454

Bureau régional de services du
Centre-Ouest
500 rue Weber Nord
WATERLOO ON N2L 4E9
Téléphone: (888) 432-7901
Télécopieur: (519) 885-9454

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
May 25, 2018	2018_539120_0020	003884-18	Follow up

Licensee/Titulaire de permis

King Nursing Home Limited
49 Sterne Street Bolton ON L7E 1B9

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

King Nursing Home
49 Sterne Street Bolton ON L7E 1B9

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): May 1, 2018

An inspection (2017-482640-0025) was previously conducted on December 28 to January 5, 2018, at which time non-compliance was identified with the licensee's maintenance program. A compliance order (#004) was issued on January 29, 2018, with a compliance due date of April 13, 2018.

During the course of the inspection, the inspector(s) spoke with the Administrator/Owner and maintenance person.

During the course of the inspection, the inspector toured the home, reviewed maintenance policies and procedures, equipment inventory and the home's maintenance software program.

**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)

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:

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO NO DE L'INSPECTEUR
O.Reg 79/10 s. 90. (1)	CO #004	2017_482640_0025	120

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
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
<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. 101.
Conditions of licence**



Specifically failed to comply with the following:

s.101. (3) It is a condition of every licence that the licensee shall comply with this Act, the Local Health System Integration Act, 2006, the Commitment to the Future of Medicare Act, 2004, the regulations, and every order made or agreement entered into under this Act and those Acts. 2007, c. 8, s. 195 (12).

Findings/Faits saillants :

1. The licensee has failed to comply with the following requirement of the LTCHA: It is a condition of every license that the licensee shall comply with every order made under this Act.

Between December 28, 2017 and January 5, 2018, an inspection was conducted related to the licensee's maintenance program. On January 29, 2018, a compliance order (#004), was served under O. Reg 79/10 s. 90(1)(b). This section required the licensee to ensure that there were schedules and procedures in place for routine, preventive and remedial maintenance.

The licensee was ordered to complete the following with a compliance date of April 13, 2018;

- 1) Amend policy #V-C-10.50 titled ““HVAC Equipment Maintenance – Roof Mounted”, to include all of the various heating and cooling systems in the building, not just those mounted on the roof. The policy shall include an inventory of all equipment in the building that is required to heat and cool the air, heat the water for the radiators, heat the water for all fixtures (tubs, showers, hand sinks, washers, dishwashers) and to ventilate the building (exhaust and fresh air supply).
- 2) The “HVAC” policy shall include specific inspection procedures which would be followed by the licensee’s maintenance staff for all of the building’s heating, cooling and ventilation systems as well as the hot water system in the building.
- 3) The “HVAC” policy shall include the role of any external contractors in maintaining the building HVAC systems and hot water systems and the frequency of their visits.
- 4) Any maintenance staff who conduct the equipment inspections shall have knowledge and understanding of all of the HVAC systems in the home, whether in accordance with the manufacturer’s directions for the various equipment or as per the direction of a licensed HVAC mechanic or engineer.
- 5) The “HVAC” policy shall include what remedial measures shall be taken if any defects,



malfunctions, leaks or abnormal operating conditions are detected and the actions taken shall be documented.

6) Detailed documentation shall be kept of all HVAC equipment inspections and repairs, which includes a date, the name of the person who inspected or repaired the HVAC equipment, the name of the equipment including any unique identifiers such as make or model or an assigned inventory number, the part or component that was cleaned, replaced or repaired and the purpose of the visit, whether remedial or preventive.

The licensee completed items #1, #2, #3, #5 and #6 but failed to complete item #4.

4) Any maintenance staff who conduct the equipment inspections shall have knowledge and understanding of all of the HVAC systems in the home, whether in accordance with the manufacturer's directions for the various equipment or as per the direction of a licensed HVAC mechanic or engineer.

During the follow up inspection completed on May 1, 2018, the Administrator reported that they did not have an Environmental Services Supervisor (ESS) on site, that they were in the process of interviewing candidates for the position. Two part-time maintenance staff were employed, one of whom was in the home at the time of inspection. The available maintenance person was interviewed on May 1, 2018, and determined not to have had any training or experience with the home's HVAC systems. They were unaware as to how to turn down the heat in the home. The Administrator reported that both of the maintenance staff members would receive some orientation from their HVAC contractor as to the use of the thermostats for the heating and cooling systems in the home.

On May 14, 2018, the Administrator reported that they had offered the ESS position to a person, who had some knowledge regarding HVAC systems. The person, would not however, begin working in the home for several weeks, and once started, would be oriented and trained by their HVAC contractor on the HVAC systems in the home. [s. 101. (3)]

Additional Required Actions:

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



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Issued on this 30th day of May, 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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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
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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

**Long-Term Care Homes Division
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**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_0020

Log No. /

No de registre : 003884-18

Type of Inspection /

Genre d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : May 25, 2018

Licensee /

Titulaire de permis : King Nursing Home Limited
49 Sterne Street, Bolton, ON, L7E-1B9

LTC Home /

Foyer de SLD : King Nursing Home
49 Sterne Street, Bolton, ON, L7E-1B9

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur : Janice King

To King Nursing Home Limited, you are hereby required to comply with the following order(s) by the date(s) set out below:

Order(s) of the InspectorPursuant 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***Order # /****Ordre no :** 001**Order Type /****Genre d'ordre :** Compliance Orders, s. 153. (1) (b)**Pursuant to / Aux termes de :**

LTCHA, 2007 S.O. 2007, c.8, s.101. (3) It is a condition of every licence that the licensee shall comply with this Act, the Local Health System Integration Act, 2006, the Commitment to the Future of Medicare Act, 2004, the regulations, and every order made or agreement entered into under this Act and those Acts. 2007, c. 8, s. 195 (12).

Order / Ordre :

The licensee must be compliant with O. Reg. 79/10, s. 90(1).

The licensee shall complete, submit and implement a plan that summarizes;

- a) the qualifications of the newly hired Environmental Services Supervisor (ESS) with respect to their understanding and knowledge of the HVAC systems in the home, and;
- b) how the ESS will become familiar with the HVAC systems in the home and what additional training and orientation will be required for their learning requirements, whether in accordance with the manufacturer's directions for the various equipment or as per the direction of a licensed HVAC mechanic or engineer, and;
- c) how the current part time maintenance staff or future maintenance staff will become familiar with the HVAC controls to ensure that the air and water temperatures in the home remain within required temperature ranges.

The plan shall be submitted to www.central.west.sao@ontario.ca addressed to Bernadette Susnik by June 30, 2018. The plan shall be implemented by September 1, 2018.

Grounds / Motifs :

1. The licensee has failed to comply with the following requirement of the LTCHA: It is a condition of every license that the licensee shall comply with every order made under this Act.

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*

Between December 28, 2017 and January 5, 2018, an inspection was conducted related to the licensee's maintenance program. On January 29, 2018, a compliance order (#004), was served under O. Reg 79/10 s. 90(1)(b). This section required the licensee to ensure that there were schedules and procedures in place for routine, preventive and remedial maintenance, specifically for heating/cooling and ventilation (HVAC) systems.

The licensee was ordered to complete the following with a compliance date of April 13, 2018;

- 1) Amend policy #V-C-10.50 titled “HVAC Equipment Maintenance – Roof Mounted”, to include all of the various heating and cooling systems in the building, not just those mounted on the roof. The policy shall include an inventory of all equipment in the building that is required to heat and cool the air, heat the water for the radiators, heat the water for all fixtures (tubs, showers, hand sinks, washers, dishwashers) and to ventilate the building (exhaust and fresh air supply).
- 2) The “HVAC” policy shall include specific inspection procedures which would be followed by the licensee’s maintenance staff for all of the building’s heating, cooling and ventilation systems as well as the hot water system in the building.
- 3) The “HVAC” policy shall include the role of any external contractors in maintaining the building HVAC systems and hot water systems and the frequency of their visits.
- 4) Any maintenance staff who conduct the equipment inspections shall have knowledge and understanding of all of the HVAC systems in the home, whether in accordance with the manufacturer’s directions for the various equipment or as per the direction of a licensed HVAC mechanic or engineer.
- 5) The “HVAC” policy shall include what remedial measures shall be taken if any defects, malfunctions, leaks or abnormal operating conditions are detected and the actions taken shall be documented.
- 6) Detailed documentation shall be kept of all HVAC equipment inspections and repairs, which includes a date, the name of the person who inspected or repaired the HVAC equipment, the name of the equipment including any unique identifiers such as make or model or an assigned inventory number, the part or component that was cleaned, replaced or repaired and the purpose of the visit, whether remedial or preventive.

The licensee completed items #1, #2, #3, #5 and #6 but failed to complete item #4.

4) Any maintenance staff who conduct the equipment inspections shall have knowledge and understanding of all of the HVAC systems in the home, whether in accordance with the manufacturer's directions for the various equipment or as per the direction of a licensed HVAC mechanic or engineer.

During the follow up inspection completed on May 1, 2018, the Administrator reported that they did not have an Environmental Services Supervisor (ESS) on site, that they were in the process of interviewing candidates for the position. Two part-time maintenance staff were employed, one of whom was in the home at the time of inspection. The available maintenance person was interviewed on May 1, 2018, and determined not to have had any training or experience with the home's HVAC systems. They were unaware as to how to turn down the heat in the home. The Administrator reported that both of the maintenance staff members did not receive any orientation from their HVAC contractor as to the use of the thermostats for the heating and cooling systems in the home, but would arrange to have this task completed.

On May 14, 2018, the Administrator reported that they had offered the ESS position to a person, who had some knowledge regarding HVAC systems. The person, would not however, begin working in the home for several weeks, and once started, would be oriented and trained by their HVAC contractor on the HVAC systems in the home.

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.90(1) of O. Reg. 79/10, the severity of this issue was determined to be a level 2 as failure to have maintenance policies and procedures in place has a potential of causing harm to residents. The scope of the issue was a level 1 (isolated), as only those policies and procedures related to HVAC systems were not in place. The history of non-compliance is a level 4 as the history of non-compliance in the same area was on-going and included;

* Compliance order (#004) made under s. 90(1) of O. Reg. 79/10 issued on January 29, 2018 (2017-482640-0025) with a compliance due date of April 13, 2018.

(120)



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de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Sep 01, 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, 11^e 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 25th day of May, 2018

Signature of Inspector /

Signature de l'inspecteur :



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de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

Name of Inspector /

BERNADETTE SUSNIK

Nom de l'inspecteur :

Service Area Office /

Bureau régional de services : Central West Service Area Office