

Inspection Report under the Long-Term Care Homes Act, 2007 Ministére 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 Toronto Service Area Office 5700 Yonge Street, 5th Floor TORONTO, ON, M2M-4K5 Telephone: (416) 325-9660 Facsimile: (416) 327-4486 Bureau régional de services de Toronto 5700, rue Yonge, 5e étage TORONTO, ON, M2M-4K5 Téléphone: (416) 325-9660 Télécopieur: (416) 327-4486

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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jun 13, 14, 19, Jul 12, Aug 3, 7, 10, 2012	2012_147113_0022	Other
Licensee/Titulaire de permis		

601091 ONTARIO LIMITED

429 WALMER ROAD, TORONTO, ON, M5P-2X9

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

CEDARVALE TERRACE 429 WALMER ROAD, TORONTO, ON, M5P-2X9

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

JANE CARRUTHERS (113)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct an Other inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator and the Environmental Service Manager.

During the course of the inspection, the inspector(s) conducted a walk through of all Resident Home Areas and inspected door security.

The following Inspection Protocols were used during this inspection: Infection Prevention and Control

Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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Legend	Legendé
<ul> <li>WN – Written Notification</li> <li>VPC – Voluntary Plan of Correction</li> <li>DR – Director Referral</li> <li>CO – Compliance Order</li> <li>WAO – Work and Activity Order</li> </ul>	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
	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 O.Reg 79/10, s. 9. Doors in a home

Specifically failed to comply with the following subsections:

s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with: 1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be,

i. kept closed and locked,

ii.equipped with a door access control system that is kept on at all times, and

iii.equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and, A, is connected to the resident-staff communication and response system, or

B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.

1.1. All doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, must be equipped with locks to restrict unsupervised access to those areas by residents.

2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents.

3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.

4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9. (1).

#### Findings/Faits saillants :

1. The alarms on all stairway doors are not connected to the resident-staff communication and response system nor an audio visual enunciator that is connected to the nurses' station nearest to the door.

The alarm at the main door entrance into the home is not connected to the resident-staff communication and response system nor an audio visual enunciator that is connected to the nurses' station nearest to the door.

The remaining exterior doors do not have alarms that allows calls to be canceled only at the point of activation and is connected to the resident-staff communication and response system or an audio visual enunciator that is connected to the nurses' station nearest to the door. [sect 9.(1)1.iii]

2. All exterior doors with the exception of the front door are not locked.

Stairway doors are not locked on 1st, 2nd, 3rd, 5th and 6th floors.

[sect 9.(1)1.i]



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Additional Required Actions:

CO # - 001, 002 will be served on the licensee. Refer to the "Order(s) of the Inspector".

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 87. Housekeeping

Specifically failed to comply with the following subsections:

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,

(a) cleaning of the home, including,

(i) resident bedrooms, including floors, carpets, furnishings, privacy curtains, contact surfaces and wall surfaces, and

(ii) common areas and staff areas, including floors, carpets, furnishings, contact surfaces and wall surfaces; (b) cleaning and disinfection of the following in accordance with manufacturer's specifications and using, at a minimum, a low level disinfectant in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices:

(i) resident care equipment, such as whirlpools, tubs, shower chairs and lift chairs,

(ii) supplies and devices, including personal assistance services devices, assistive aids and positioning aids, and

(iii) contact surfaces;

(c) removal and safe disposal of dry and wet garbage; and

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

#### Findings/Faits saillants :

1. Staff did not clean and disinfect resident care equipment in a shower room after use. At approximately 11:05 on June 13,2012, a sixth floor shower room was left with soiled towels on shower chair and floor, paper towels on the floor and fecal matter on the floor of the shower and the shower chair. It remained in this state until approximately 11:25am when staff picked up towel and wiped up the fecal matter. They did not use a disinfectant after cleaning. [sect 87(2)(b)]

#### 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 there is an organized program for cleaning and disinfecting of resident care equipment, such as whirlpools, tubs, shower chairs, and lift chairs and supplies and devices. This plan is, to be implemented voluntarily.

Issued on this 16th day of August, 2012

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



## 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

## Ministére 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

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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Name of Inspector (ID #) / Nom de l'inspecteur (No) :	JANE CARRUTHERS (113)
Inspection No. / No de l'inspection :	2012_147113_0022
Type of Inspection / Genre d'inspection:	Other
Date of Inspection / Date de l'inspection :	Jun 13, 14, 19, Jul 12, Aug 3, 7, 10, 2012
Licensee /	
Titulaire de permis :	601091 ONTARIO LIMITED 429 WALMER ROAD, TORONTO, ON, M5P-2X9
LTC Home /	
Foyer de SLD :	CEDARVALE TERRACE 429 WALMER ROAD, TORONTO, ON, M5P-2X9
Name of Administrator / Nom de l'administratrice	
ou de l'administrateur :	LINDA CALABRESE

To 601091 ONTARIO LIMITED, you are hereby required to comply with the following order(s) by the date(s) set out below:



## 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

### Ministére 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

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

#### Pursuant to / Aux termes de :

O.Reg 79/10, s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be,

i. kept closed and locked,

ii.equipped with a door access control system that is kept on at all times, and

iii.equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and, A. is connected to the resident-staff communication and response system, or

B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.

1.1. All doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, must be equipped with locks to restrict unsupervised access to those areas by residents.

2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents.

3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.

4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9. (1).

#### Order / Ordre :

The licensee shall prepare, submit, and implement a written plan outlining how the licensee will ensure all doors leading to stairways and the outside of the home are kept closed and locked. Please submit the plan to jane.carruthers@ontario.ca on or before August 31, 2012.

#### Grounds / Motifs :

1. Stairway doors are not locked on 1st, 2nd, 3rd, 5th and 6th floors. (113)

2. All exterior doors with the exception of the front door are not locked. (113)

#### This order must be complied with by / Vous devez vous conformer à cet ordre d'ici le :

Vous devez vous conformer à cet ordre d'ici le : Dec 31, 2012



## 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

### Ministére 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

Order # / Order Type /		Order Type /	
Ordre no :	002	Genre d'ordre :	Compliance Orders, s. 153. (1) (b)

#### Pursuant to / Aux termes de :

O.Reg 79/10, s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be,

i. kept closed and locked,

ii.equipped with a door access control system that is kept on at all times, and

iii.equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and, A. is connected to the resident-staff communication and response system, or

B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.

1.1. All doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, must be equipped with locks to restrict unsupervised access to those areas by residents.

2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents.

3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.

4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9. (1).

#### Order / Ordre :

The licensee shall prepare, submit and implement a written plan outlining how the licensee will ensure all doors leading to the stairways and the outside of the home are equipped with an audible door alarm that allows calls to be canceled only at the point of activation and that the alarm is connected either to the resident-staff communication system or connected to an audio visual enunciator that is connected to the nurses' station nearest the door and has a manual reset switch at each door. Please submit the plan to jane.carruthers@ontario.ca on or before August 31, 2012.

#### Grounds / Motifs :

1. The alarms on all stairway doors do not connect to the resident-staff communication and response system nor an audio visual enunciator that is connected to the nurses' station nearest to the door.

The alarm at the main door entrance into the home is not connected to the resident-staff communication and response system nor an audio visual enunciator that is connected to the nurses' station nearest to the door. The remaining exterior doors do not have alarms that allows calls to be cancelled only at the point of activation and is connected to the resident-staff communication and response system or an audio visual enunciator that is connected to the nurses' station nearest to the table.

This order must be complied with by / Vous devez vous conformer à cet ordre d'ici le : Dec 31, 2012



# 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

### Ministére 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 or by fax upon:

Director c/o Appeals Coordinator Performance Improvement and Compliance Branch Ministry of Health and Long-Term Care 55 St. Clair Avenue West Suite 800, 8th Floor Toronto, ON M4V 2Y2 Fax: 416-327-7603

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing 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:

Director

Health Services Appeal and Review Board and the

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

Director c/o Appeals Coordinator Performance Improvement and Compliance Branch Ministry of Health and Long-Term Care 55 St. Clair Avenue West Suite 800, 8th Floor Toronto, ON M4V 2Y2 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.



# 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

### Ministére 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

#### **RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL**

#### PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

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

La demande de réexamen doit contenir ce qui suit :

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

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au :

Directeur a/s Coordinateur des appels Direction de l'amélioration de la performance et de la conformité Ministère de la Santé et des Soins de longue durée 55, avenue St. Clair Ouest 8e étage, bureau 800 Toronto (Ontario) M4V 2Y2 Télécopieur : 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.

En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire Commission d'appel et de révision des services de santé 151, rue Bloor Ouest, 9e étage Toronto (Ontario) M5S 2T5 Directeur a/s Coordinateur des appels Direction de l'amélioration de la performance et de la conformité Ministère de la Santé et des Soins de longue durée 55, avenue St. Clair Ouest 8e étage, bureau 800 Toronto (Ontario) M4V 2Y2 Télécopieur : 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

#### Issued on this 10th day of August, 2012

Signature of Inspector / Signature de l'inspecteur :

Name of Inspector / Nom de l'inspecteur : JANE CARRUTHERS

Service Area Office / Bureau régional de services : Toronto Service Area Office

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