



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

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

**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  
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**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**

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**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du apport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Feb 26, 2015	2015_264609_0010	008111-14	Complaint

**Licensee/Titulaire de permis**

ST. JOSEPH'S HEALTH CARE, LONDON  
268 Grosvenor Street P.O. Box 5777 LONDON ON N6A 4V2

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

ST. JOSEPH'S HEALTH CARE, LONDON - MOUNT HOPE CENTRE FOR LONG TERM  
CARE - MARIAN VILLA  
200 COLLEGE AVENUE P.O. BOX 5777 LONDON ON N6A 1Y1

**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs**  
CHAD CAMPS (609)

**Inspection Summary/Résumé de l'inspection**



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**The purpose of this inspection was to conduct a Complaint inspection.**

**This inspection was conducted on the following date(s): February 23-24, 2015**

**During the course of the inspection, the inspector(s) spoke with 1 Registered Practical Nurse, 3 Primary Care Providers, 1 Coordinator, 1 Environmental Manager and 1 Resident.**

**During the course of the inspection, the inspector also reviewed the home's policies and procedures, tested the call bell system on 3 floors of the home as well as reviewed clinical records.**

**The following Inspection Protocols were used during this inspection:  
Safe and Secure Home**

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

**1 WN(s)  
1 VPC(s)  
0 CO(s)  
0 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 O.Reg 79/10, s. 17. Communication and response system**



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**Specifically failed to comply with the following:**

- s. 17. (1) Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that,**
- (a) can be easily seen, accessed and used by residents, staff and visitors at all times; O. Reg. 79/10, s. 17 (1).**
  - (b) is on at all times; O. Reg. 79/10, s. 17 (1).**
  - (c) allows calls to be cancelled only at the point of activation; O. Reg. 79/10, s. 17 (1).**
  - (d) is available at each bed, toilet, bath and shower location used by residents; O. Reg. 79/10, s. 17 (1).**
  - (e) is available in every area accessible by residents; O. Reg. 79/10, s. 17 (1).**
  - (f) clearly indicates when activated where the signal is coming from; and O. Reg. 79/10, s. 17 (1).**
  - (g) in the case of a system that uses sound to alert staff, is properly calibrated so that the level of sound is audible to staff. O. Reg. 79/10, s. 17 (1).**

**Findings/Faits saillants :**



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1. a) The licensee has failed to ensure that the resident-staff communication and response system which uses sound to alert staff is calibrated so that the level of sound is audible to staff.

On an identified floor of the home call bells were activated. The sound to alert staff could not be heard by the inspector.

A Primary Care Provider and the Coordinator of the home acknowledged that though the call bell was activated there was no audible sound to alert staff.

They further acknowledged the safety risk to residents and staff if the call bell alerts are not heard and therefore not responded to in a timely manner.

The Coordinator confirmed that it is the home's expectation that the communication and response system should be audible in all units when activated and in the case of an identified floor this did not occur.

b) The inspector requested a Registered Practical Nurse to activate a call bell in a resident's room on a different identified floor of the home. A Primary Care Provider and the Registered Practical Nurse confirmed that the sound to alert staff was not audible on an identified floor of the home.

The staff members acknowledged to the inspector that this was a safety concern as staff working in the opposite wings of an identified floor would not be alerted to the activation of the call bells.

The staff confirmed that it is the home's expectation that the communication and response system should be audible in all units when activated and in the case of the identified floor this did not occur. [s. 17. (1) (g)]



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***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 that the resident-staff communication and  
response system which uses sound to alert staff is calibrated so that the level of  
sound is audible to staff, to be implemented voluntarily.***

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**Issued on this 26th day of February, 2015**

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

**Original report signed by the inspector.**