



**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**

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Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Oct 3, 2017	2017_593573_0022	014850-17	Resident Quality Inspection

Licensee/Titulaire de permis

NORTH RENFREW LONG-TERM CARE SERVICES INC.
47 Ridge Rd DEEP RIVER ON K0J 1P0

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

NORTH RENFREW LONG-TERM CARE SERVICES INC.
47 RIDGE ROAD P.O. BOX 1988 DEEP RIVER ON K0J 1P0

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

ANANDRAJ NATARAJAN (573), JOELLE TAILLEFER (211)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Resident Quality Inspection.

This inspection was conducted on the following date(s): September 25 - 29, 2017

During the course of the inspection, the inspector(s) spoke with the residents, family members, Housekeeping Aides, Personal Support Workers (PSWs), Registered Nurses (RN), Building Maintenance Personnel, Recreation Leader, RAI Coordinator, the Manager of Resident Services (MRS), and the Administrator.

During the course of the inspection, the inspector(s) observed residential and non-residential areas of the home, observed a medication pass including medication room, observed recreation activities, observed staff to residents interaction and resident to resident interactions. In addition the inspectors reviewed home's relevant policies and required programs, reviewed minutes for Residents' Council and reviewed Resident Health Care records.

The following Inspection Protocols were used during this inspection:

Contenance Care and Bowel Management

Falls Prevention

Family Council

Infection Prevention and Control

Medication

Minimizing of Restraining

Pain

Residents' Council

Safe and Secure Home

Skin and Wound Care

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)



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
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. 9. Doors in a home



Specifically failed to comply with the following:

- 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.**
- O. Reg. 79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).**

- 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.**
- O. Reg. 79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).**

s. 9. (2) The licensee shall ensure there is a written policy that deals with when doors leading to secure outside areas must be unlocked or locked to permit or restrict unsupervised access to those areas by residents. O. Reg. 363/11, s. 1 (3).

Findings/Faits saillants :

- 1. The licensee has failed to ensure that all doors leading to secure outside area that preclude exit by a resident, including balconies and terraces, must be equipped with locks to restrict unsupervised access to those areas by residents.**

On September 25, 2017 at 1130 hours, Inspector #211 observed two doors leading to the home's secured outside area with metal fence. Inspector observed that both doors were equipped with a key lock mechanism. The key lock mechanism was located on the outside aspect of the doors. There was no locking mechanism on the inside aspect of the doors, inside the home. Inspector #211 was able to open the secure outside area's door from the home's lounge area upon opening the door the inspector noted that the door alarm was activated. A staff member immediately responded to the alarm.



During an interview with the Manager of Resident Services (MRS) on September 26, 2017, the MRS indicated that the secure outside patio area on the ground floor of the Long Term Care (LTC) home was considered a residential area. She indicated that residents are allowed to go outside at any time of the day or evening. The MRS indicated that an alarm system for both secure outside patio's doors are connected to the staff's phone system. In addition, an alarm will ring to alert the staff when these doors are opened. The MRS demonstrated that these doors can be only locked with a key from the outside doorknobs to prevent individual from entering the LTC home area, these doors are always unlocked from the inside to give access to the residents to enter the secure outside area.

During an interview with the Administrator on September 26, 2017, who indicated that the two doors leading to the secure outside patio area, are always unlocked so that residents can enter and use the secure outside area. The Administrator also indicated that the outside doorknobs are locked when there are special community events that occur in close proximity of the home to ensure resident safety. The Administrator confirmed that all residents from the LTC home can access the secure outside area at any time. She indicated that the secure outside area's doors were equipped with an alarm system to alert the staff when these doors are opened but there are no inside locking mechanism to secure the doors from the inside of the home.

On September 26, 2017, Inspectors #211 and #573 observed that the two doors leading to the secure outside patio area were not equipped with an inside lock system that could be unlocked or locked to permit or restrict unsupervised access to this area by the residents. [s. 9. (1) 1.1.]

2. The licensee has failed to ensure that there is a written policy that deals with when doors leading to secure outside areas must be unlocked or locked to permit or restrict unsupervised access to those areas by residents.

On September 26, 2017 at 1608 hours, Inspectors #211 and #573 observed that the two doors leading to the secure outside patio area were not equipped with an inside lock system that could be unlocked or locked to permit or restrict unsupervised access to this area by the residents.

During an interview with the Administrator on September 26, 2017, who indicated that the licensee does not have a written policy related to the doors leading to the secure outside patio area from the ground floor of the LTC home. The Administrator confirmed that a



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policy must be written that will deal with when both doors leading to the secure outside patio must be unlocked or locked to permit or restrict unsupervised access to that area by the residents. [s. 9. (2)]

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 a) All doors leading to secure outside areas must be equipped with locks to restrict unsupervised access to those areas by residents b) There is a written policy that deals with when doors leading to secure outside areas must be unlocked or locked to permit or restrict unsupervised access to those areas by residents, to be implemented voluntarily.

Issued on this 3rd day of October, 2017

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

Original report signed by the inspector.