



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
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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
Sep 20, 21, 2012	2012_028102_0043	Critical Incident

Licensee/Titulaire de permis

OMNI HEALTH CARE LIMITED PARTNERSHIP
1840 LANSDOWNE STREET WEST, UNIT 12, PETERBOROUGH, ON, K9K-2M9

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

PLEASANT MEADOW MANOR
99 Alma Street, P. O. Box 426, Norwood, ON, K0L-2V0

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

WENDY BERRY (102)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Critical Incident inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator/Director of Care; Charge Nurse; Maintenance Manager; several other staff.

During the course of the inspection, the inspector(s) checked the emergency power panel, transfer switch and generator connection; reviewed the emergency plans for the home.

The following Inspection Protocols were used during this inspection:

Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 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.

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. 230. Emergency plans

Specifically failed to comply with the following subsections:

s. 230. (2) Every licensee of a long-term care home shall ensure that the emergency plans for the home are in writing. O. Reg. 79/10, s. 230 (2).

s. 230. (4) The licensee shall ensure that the emergency plans provide for the following:

- 1. Dealing with,**
 - i. fires,**
 - ii. community disasters,**
 - iii. violent outbursts,**
 - iv. bomb threats,**
 - v. medical emergencies,**
 - vi. chemical spills,**
 - vii. situations involving a missing resident, and**
 - viii. loss of one or more essential services.**
- 2. Evacuation of the home, including a system in the home to account for the whereabouts of all residents in the event that it is necessary to evacuate and relocate residents and evacuate staff and others in case of an emergency.**
- 3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the home.**
- 4. Identification of the community agencies, partner facilities and resources that will be involved in responding to the emergency. O. Reg. 79/10, s. 230 (4).**

s. 230. (6) The licensee shall ensure that the emergency plans for the home are evaluated and updated at least annually, including the updating of all emergency contact information. O. Reg. 79/10, s. 230 (6).

s. 230. (8) The licensee shall keep current all arrangements with community agencies, partner facilities and resources that will be involved in responding to emergencies. O. Reg. 79/10, s. 230 (8).

Findings/Faits saillants :

1. Emergency plans for the home are contained in a binder labelled "Disaster Manual". The binder was identified by staff as being currently in use.
2. Emergency plans for the home are not all in writing:
 - actions and resources required to obtain a standby emergency generator to ensure it is onsite and operational within 3 hours of a power outage;
 - emergency plans dealing with the loss of one or more of the essential services (example: resident staff communication and response system)
 - the resources, supplies and equipment vital for the emergency response being set aside and available in the home [s.230.(2)]
3. Emergency plans are not provided that deal with:
violent outbursts; medical emergencies; chemical spills; loss of one or more of the essential services. [s. 230.(4)]
4. The emergency plans for the home have not been evaluated and updated annually, for example:
 - "missing resident" policy dated July 15, 2005 contains outdated management contact information and no reference to use of code yellow response
 - "extended power failure-loss of utilities" policy is dated February 2003 and does not identify current emergency power availability
 - "loss of heat-winter" policy is dated February 2003 and makes reference to a heating system that the home does not have
 - etc. [s. 230.(6)]
5. Arrangements with community agencies, partner facilities and resources that will be involved in responding to emergencies have not been kept current: generator agreement; agreement with the town council related to an evacuation site, etc. [s.230.(8)]

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 emergency plans for the home are evaluated and updated, are in writing and comply with legislated requirements, to be implemented voluntarily.

Issued on this 21st day of September, 2012

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