Ontario

Ministry of Health and Long-Term Care

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
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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
Apr 13, 2012	2012_072120_0033	Complaint

Licensee/Titulaire de permis

LIUNA LOCAL 837 NURSING HOME(HAMILTON) CORPORATION
44 HUGHSON STREET SOUTH, HAMILTON, ON, L8N-2A7

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

QUEEN'S GARDEN
80 Queen Street North, HAMILTON, ON, L8R-3P6

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

BERNADETTE SUSNIK (120)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with the administrator and environmental services supervisor regarding safety and security.(H-000673-12)

During the course of the inspection, the inspector(s) toured all 6 home areas and the basement and tested all utility room, fire separation, dining room, lounge, stairwell and courtyard doors.

The following Inspection Protocols were used during this inspection:

Accommodation Services - Maintenance

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
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.) 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 LTCHA, 2007 S.O. 2007, c.8, s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents. 2007, c. 8, s. 5.

Findings/Faits saillants :

1. The home was not a safe environment for its residents on April 13th, 2012. The Jamesville dining room servery was left unattended by staff on April 13th, 2012 at approximately 12:10 p.m. for approximately 10 minutes. The swing gate meant to keep residents from wandering into the servery was left wide open. The servery has a hot water dispenser (water dispensed at 100C), easily accessible to the 6 residents that were in the dining room at the time.

2. An exit door in the Jamesville dining room, which leads to an outdoor enclosed courtyard, was observed to be blocked with a wooden buffet/cabinet on April 13, 2012. This door is a designated fire exit, according to the local fire inspector, and must remain easily accessible at all times. According to the administrator, the door was blocked to prevent a resident, who is an exit seeker, from gaining access to the courtyard while unsupervised. The resident had previously unlocked the door and tried to get over the fence in the courtyard. In the case of fire, residents and staff would have some difficulty or delay in exiting the room when blocked by the furniture. At the time of the inspection, the administrator had already made plans to have a magnetic locking system and key pad installed for the courtyard door (to replace the dead bolt type lock) and was waiting for a permit. The target date for completion is April 30, 2012.

Visual confirmation was made on April 20, 2012 that the furniture had been removed from the courtyard door area.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 91. Every licensee of a long-term care home shall ensure that all hazardous substances at the home are labelled properly and are kept inaccessible to residents at all times. O. Reg. 79/10, s. 91.

Findings/Faits saillants :

1. Hazardous substances are not kept inaccessible to residents at all times. The Dust Bin room located in the Durand home area, off the dining room on the 1st floor, was found unlocked on April 13th and April 20th, 2012. Various concentrated cleaning chemicals and a bottle of Virox disinfectant were stored inside the room. These products all have warnings on the label that they are not to be ingested as they have harmful ingredients. No staff were present in the vicinity of the room at the times of the observation.

2. The Jamesville dining room servery was left unattended and accessible to residents on April 13, 2012 at approximately 12:10 p.m. A bottle of sanitizer was located under the sink and accessible to residents. The sanitizer contains ingredients that may be harmful if swallowed.

Issued on this 14th day of May, 2012

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