

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 London Service Area Office 130 Dufferin Avenue 4th floor LONDON ON N6A 5R2 Telephone: (519) 873-1200 Facsimile: (519) 873-1300 Bureau régional de services de London 130 avenue Dufferin 4ème étage LONDON ON N6A 5R2 Téléphone: (519) 873-1200 Télécopieur: (519) 873-1300

Public Copy/Copie du public

Report Date(s) / Date(s) du apport

Inspection No /
No de l'inspection

Log # / Registre no Type of Inspection / Genre d'inspection

Aug 2, 2016

2016_260521_0025

015867-15

Follow up

Licensee/Titulaire de permis

CORPORATION OF THE COUNTY OF GREY 959 9th Avenue East OWEN SOUND ON N4K 3E3

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

ROCKWOOD TERRACE HOME FOR THE AGED 575 SADDLER STREET EAST P. O. BOX 660 DURHAM ON NOG 1R0

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs REBECCA DEWITTE (521)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): June 23, 2016.

This inspection pertained to a follow up on order #001 from report #2015 325568 0015.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, the Maintenance Manager, one housekeeper and one nurse aide.

The inspector(s) also conducted a tour of all resident areas and common areas, observed residents and the care provided to them and reviewed policies and protocols with management.

The following Inspection Protocols were used during this inspection: Accommodation Services - Maintenance

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)

The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

, -			INSPECTOR ID #/ NO DE L'INSPECTEUR
LTCHA, 2007 S.O. 2007, c.8 s. 15. (2)	CO #001	2015_325568_0015	521



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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. 8. Policies, etc., to be followed, and records

Specifically failed to comply with the following:

- s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,
- (a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).
- (b) is complied with. O. Reg. 79/10, s. 8 (1).



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Findings/Faits saillants:

1. The licensee has failed to ensure that where the Act or this Regulation required the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system was complied with.

Under regulation s.90(1)(b) the licensee is required to ensure that as part of the organized program of maintenance services there are schedules and procedures in place for routine, preventative and remedial maintenance. The Work Order Requisition policy, as part of the maintenance services program was not complied with.

Observations revealed there were areas of concerns regarding the maintenance of the home.

A tour on of the concerned areas revealed:

Common areas and the entrance to elevators continued to appear heavily marked and scuffed as well as concerns in resident rooms.

The main dining room baseboard had fallen away from the wall – verified by staff.

An interview with the staff revealed the work requested to be completed in the previous order had been completed and a review of the Worx software confirmed the work had been completed. The interview also revealed there was a process for staff to report areas of maintenance concern using the Worx software for the continued maintenance of the building.

The staff stated that when staff see an area of concern the staff member should log into Worx and document the concern. The maintenance team should then create a work order based on priority and complete the required task.

The interview further revealed not all of the staff follow this process stating "they don't have time for that".

A review of the home's policy #XVII-B-30.00 Work Order Requisitions revised June 2015, revealed "all staff will utilize PM Worx to request maintenance repairs to ensure that the physical plant, building, equipment and furnishings are maintained in good condition".



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An interview with the staff confirmed some of the staff do follow this process but not all of the staff follow the process, failing to ensure that the policy was complied with. [s. 8. (1) (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 that the policy for Work Order Requisitions is complied with, to be implemented voluntarily.

Issued on this 4th day of August, 2016

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

Original report signed by the inspector.