Ontario

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 apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jun 17, 2016	2016_290551_0012	024193-15, 017048-16	Complaint

Licensee/Titulaire de permis

458422 ONTARIO LIMITED
220 EMMA STREET CORNWALL ON K6J 5V8

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

SANDFIELD PLACE
220 EMMA STREET CORNWALL ON K6J 5V8

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

MEGAN MACPHAIL (551)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): June 6, 7, 8 and 9, 2016.

The following logs were inspected: 024193-15 (temperature in the home), 017048-16 (allegation of staff to resident abuse).

During the course of the inspection, the inspector(s) spoke with Residents, Personal Support Workers (PSWs), Registered Nursing Staff, the Physiotherapist Assistant, the Maintenance Manager, the Director of Care and the Administrator.

During the course of the inspection, the inspector(s): reviewed health care records, reviewed training records, reviewed the home's Prevention of Hot-Weather Related Illness policy, reviewed the home's Record of Humidex Readings, measured air temperature and humidity.

The following Inspection Protocols were used during this inspection:
Nutrition and Hydration
Prevention of Abuse, Neglect and Retaliation
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)**

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). 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. 20. Cooling requirements

Specifically failed to comply with the following:

s. 20. (1) Every licensee of a long-term care home shall ensure that a written hot weather related illness prevention and management plan for the home that meets the needs of the residents is developed in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices and is implemented when required to address the adverse effects on residents related to heat. O. Reg. 79/10, s. 20 (1).

Findings/Faits saillants :

1. The licensee has failed to ensure that the written hot weather related illness and prevention management plan for the home that meets the needs of residents is developed in accordance with evidence-based practices and is implemented when required to address the adverse effects on residents related to heat.

According to the Maintenance Manager, the home is air conditioned in the following resident areas: the two dining rooms, the sitting room, from the main entry to the fire doors of the corridor to rooms one to twelve, the nurses' station and from the nurses' station to the fire doors of the corridor to rooms eighteen to twenty four. There are four residents rooms in the area of the nurses' station.

The Registered Nurse monitors the heat and humidity in the building in order to determine the humidex, which reflects a perceived temperature, in order for staff to be on heightened alert for symptoms of resident distress. In the summer of 2015, the humidex was recorded as being thirty (30) degrees Celsius or greater on thirty seven (37) occasions and reached a high of thirty five (35) degrees Celsius on two occasions. According to the Guidelines for the Prevention and Management of Hot Weather Related Illness in Long-Term Care Homes, humidex levels between thirty (30) and thirty nine (39) degrees Celsius will result in some people feeling uncomfortable and some may begin to present with signs and symptoms of heat related illness.

On July 19, 2012, in a memo to Long-Term Care Home Administrators, the Acting Director directed long-term care homes to use the most up-dated version of "Guidelines for the Prevention and Management of Hot Weather Related Illness in Long-Term Care Homes (July 2012)", in conjunction with other expert sources of evidence-based practices, as a point of reference in developing or enhancing their own customized hot weather illness prevention and management plans.

According to the Guidelines, understanding and being able to identify the risk factors to LTCH residents is essential to preventing the possible onset of heat related illness and conditions. The Guidelines state that all residents are at risk of heat related illness, and that after completing the risk assessment, it should be determined whether residents are at increased risk during hot weather; or potentially at increased risk during hot weather.

The home's policy Prevention of Hot Weather Related Illness (4.1.9) was reviewed. Under Pre-Season Procedures Preparation and Planning, it directs Medical/Nursing staff

to
1) Complete resident risk assessment for heat related illness.
2) Identify residents who are at a potential or increased risk of heat related illness and communicate to interdisciplinary team members.
3) Develop heat related interdisciplinary resident care plans.

The health care records of resident #001, resident #002 and resident #003 were reviewed.

A Heat Risk Assessment was not completed for any of the residents, and the residents are not identified as being at increased risk during hot weather or potentially at risk during hot weather.

The plans of care for resident #001 and #003 do not address any risk related to hot weather. [s. 20. (1)]

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 the written hot weather related illness and prevention management plan for the home that meets the needs of residents is developed in accordance with evidence-based practices and is implemented when required to address the adverse effects on residents related to heat, to be implemented voluntarily.

Issued on this 17th day of June, 2016

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

Original report signed by the inspector.