



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

Inspection Report under the Long-Term Care Homes Act, 2007

Rapport d'inspection sous la Loi de 2007 sur les foyers de soins de longue durée

**Health System Accountability and Performance Division
Performance Improvement and Compliance Branch**

Ottawa Service Area Office
347 Preston St, 4th Floor
OTTAWA, ON, K1S-3J4
Telephone: (613) 569-5602
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Bureau régional de services d'Ottawa
347, rue Preston, 4^{ième} étage
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**Division de la responsabilisation et de la performance du système de santé
Direction de l'amélioration de la performance et de la conformité**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Dec 19, 2013	2013_178102_0033	000275-13	Follow up

Licensee/Titulaire de permis

SHEPHERD VILLAGE INC.
3758/3760 Sheppard Avenue East, TORONTO, ON, M1T-3K9

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

SHEPHERD LODGE
3760 Sheppard Avenue East, TORONTO, ON, M1T-3K9

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

WENDY BERRY (102)

Inspection Summary/Résumé de l'inspection



**Ministry of Health and
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soins de longue durée**

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

**This inspection was conducted on the following date(s): December 10 and 13,
2013**

**During the course of the inspection, the inspector(s) spoke with the
Administrator; the Facility Manager; the Coordinator, Facility Department; the
Infection Prevention and Control practitioner; several registered and non
registered staff; several residents.**

**During the course of the inspection, the inspector(s) checked stairway door
security systems on the 3rd and 7th floors; checked and discussed the
accessibility of point of care hand hygiene products (which are to me made
available in residents' bedrooms).**

**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 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 O.Reg 79/10, s. 9. Doors in a home



Specifically failed to comply with the following:

s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

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).

2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff. O. Reg. 79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).

3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency. O. Reg. 79/10, s. 9. (1).

4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9. (1).

Findings/Faits saillants :

1. Resident accessible doors leading to stairways on the 2nd through 7th floors are kept closed and locked and are equipped with a door access control system, which was "on" at the time of inspection on December 10th and 13th, 2013.

The doors leading to the stairways have been connected to an audio visual enunciator that is connected to the nurses' station nearest to the doors on floors 2 through 7.

Audio visual enunciator panels were installed in each of the north wing nurses' stations following the inspection # 2013 178102 0012, which was conducted on March 06 and 07, 2013.



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During a follow up inspection conducted on December 10 and 13, 2013, it was identified that:

- the audible door alarms provided for all doors leading to stairways on floors 2 through 7 can be cancelled at the nursing stations and not only at the door where the alarm has activated
- the audio visual enunciator for doors which is provided at each nurses station on floors 2 through 7 does not have a manual reset switch at each door. The provided keypads by the doors did not reset the audible alarm or the audio visual enunciator at the closest nursing station to the door.
- the audible alarm and audio visual enunciator panel in the north wing nurses stations on floors 3 and 7 stopped functioning after a 1 to 2 minute period of being activated by a door alert from the north stairway door. The alert continued to sound and display on audio visual enunciator modules at south wing nurses' stations.
- it was reported by the Facility Manager that an audio visual enunciator panel provided in a nurses' station on the 4th floor may be able to cancel alerts for stairway doors on all resident care floors.

Changes were made to the door security system following inspection # 2013 178102 0012, conducted March 06 and 07, 2013. Compliance order (CO)# 001, with a compliance date of June 24, 2013 related to door security was issued. The order has not been complied with with respect to O.reg 79/10, s. 9.(1)1.iii.

The audible door alarm system for resident accessible stairway doors on floors 2 through 7 presents potential risks to the safety and well being of residents who may be able to enter stairways without being detected by staff, especially if a magnetic door locking system fails to engage. Staff are currently not required to go to doors that have alerted on audio visual enunciators to determine why an alarm has activated and if resident safety is potentially compromised.

Leg Ref r. 9 (1) was inspected and is still not in compliance, refer Inspection #: 2013_178102_0012, Inspector #: 102, CO #001 [s. 9. (1)]



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Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".

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 staff are provided with training on responding to door alarms, which includes going to the point of activation only to reset the alarm and checking that resident safety has not been compromised at doors that have alerted on the audio visual enunciator, to be implemented voluntarily.

Issued on this 19th day of December, 2013

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

A handwritten signature in cursive script that reads "Mandy Berry". The signature is written in black ink on a white background within a rectangular box.



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Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007*, S.O. 2007, c.8

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

**Health System Accountability and Performance Division
Performance Improvement and Compliance Branch**

**Division de la responsabilisation et de la performance du système de santé
Direction de l'amélioration de la performance et de la conformité**

Public Copy/Copie du public

**Name of Inspector (ID #) /
Nom de l'inspecteur (No) :** WENDY BERRY (102)

**Inspection No. /
No de l'inspection :** 2013_178102_0033

**Log No. /
Registre no:** 000275-13

**Type of Inspection /
Genre
d'inspection:** Follow up

**Report Date(s) /
Date(s) du Rapport :** Dec 19, 2013

**Licensee /
Titulaire de permis :** SHEPHERD VILLAGE INC.
3758/3760 Sheppard Avenue East, TORONTO, ON,
M1T-3K9

**LTC Home /
Foyer de SLD :** SHEPHERD LODGE
3760 Sheppard Avenue East, TORONTO, ON, M1T-3K9

**Name of Administrator /
Nom de l'administratrice
ou de l'administrateur :** BROCK HALL

To SHEPHERD VILLAGE INC., you are hereby required to comply with the following order(s) by the date(s) set out below:



Ministry of Health and
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Order(s) of the Inspector
Pursuant to section 153 and/or
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Homes Act, 2007*, S.O. 2007, c.8

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

Order # / Ordre no : 001	Order Type / Genre d'ordre : Compliance Orders, s. 153. (1) (a)
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Pursuant to / Aux termes de :

O.Reg 79/10, s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

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.
- 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.
2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff.
3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.
4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9; O. Reg. 363/11, s. 1 (1, 2).

Order / Ordre :



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The licensee will ensure that all resident accessible doors leading to stairways are equipped with a functioning audible door alarm that allows calls to only be cancelled at the point of activation and is

- A. connected to the resident staff communication and response system, or
- B. 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.

Grounds / Motifs :

1. Resident accessible doors leading to stairways on the 2nd through 7th floors are kept closed and locked and are equipped with a door access control system, which was "on" at the time of inspection on December 10th and 13th, 2013. The doors leading to the stairways have been connected to an audio visual enunciator that is connected to the nurses' station nearest to the doors on floors 2 through 7. Audio visual enunciator panels were installed in each of the north wing nurses' stations following inspection # 2013 178102 0012, which was conducted on March 06 and 07, 2013. The enunciator panels were already in place in the south wing nurses' stations.

During a follow up inspection conducted on December 10 and 13, 2013, it was identified that;

- the audible door alarms provided for resident accessible doors leading to stairways on floors 2 through 7 can be cancelled at the audio visual enunciator panels at nursing stations without going to the point of activation.
- the audio visual enunciator for doors which is provided at each nurses station on floors 2 through 7 could not be manually reset at a switch at each door. The keypad provided by each of the stairway doors did not serve to manually reset the audio visual enunciator at the closest nursing station to the door or to cancel the audible alarm at the point of activation.
- the audible alarm and audio visual enunciator panel in the north wing nurses' stations on floors 3 and 7 stopped functioning after a 1 to 2 minute period of being activated from the north stairway doors. The doors in alert continued to sound and display on audio visual enunciator panels at south wing nurses' stations.
- it was reported by the Facility Manager that an audio visual enunciator panel provided in a nurses' station on the 4th floor may be able to cancel alerts for stairway doors on all resident care floors.

Changes were made to the door security system following inspection # 2013 178102 0012, conducted March 06 and 07, 2013. Compliance order (CO)# 001,



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with a compliance date of June 24, 2013 related to door security was issued.
The order has not been complied with with respect to O.reg 79/10, s. 9.(1)1.iii.

The audible door alarm system for resident accessible stairway doors on floors 2 through 7 presents potential risks to the safety and well being of residents who may be able to enter stairways without being detected by staff, especially if a magnetic door locking system fails to engage. Staff are currently not required to go to doors that have alerted on audio visual enunciators to determine why an alarm has activated and if resident safety is potentially compromised.

Leg Ref r. 9 (1) was inspected and is still not in compliance, refer Inspection #: 2013_178102_0012, Inspector #: 102, CO #001 (102)

**This order must be complied with by /
Vous devez vous conformer à cet ordre d'ici le :** Feb 28, 2014



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Order(s) of the Inspector
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section 154 of the *Long-Term Care
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REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

Director
c/o Appeals Coordinator
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603



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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the Director

Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

Director
c/o Appeals Coordinator
Performance Improvement and Compliance
Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.



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RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

La demande de réexamen doit être présentée par écrit et est signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au titulaire de permis.

La demande de réexamen doit contenir ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le titulaire de permis souhaite que le directeur examine;
- c) l'adresse du titulaire de permis aux fins de signification.

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11^e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



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En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la
conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this 19th day of December, 2013

Signature of Inspector /

Signature de l'inspecteur :

Name of Inspector /

Nom de l'inspecteur :

WENDY BERRY

Service Area Office /

Bureau régional de services : Ottawa Service Area Office