



Ministry of Health and
Long-Term Care

Ministère de la Santé et
des Soins de longue durée

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) : MONIQUE BERGER (151)

Inspection No. /

No de l'inspection : 2013_138151_0028

Log No. /

Registre no: S-000217-13

Type of Inspection /

Genre d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : Oct 24, 2013

Licensee /

Titulaire de permis : ANSON GENERAL HOSPITAL
58 Anson Dr., IROQUOIS FALLS, ON, P0K-1E0

LTC Home /

Foyer de SLD : SOUTH CENTENNIAL MANOR
240 FYFE STREET, IROQUOIS FALLS, ON, P0K-1E0

Name of Administrator /

**Nom de l'administratrice
ou de l'administrateur :** BRUCE PETERKIN

To ANSON GENERAL HOSPITAL, you are hereby required to comply with the following order(s) by the date(s) set out below:



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Order # /

Ordre no : 001

Order Type /

Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Linked to Existing Order /

Lien vers ordre existant: 2013_138151_0017, CO #001;

Pursuant to / Aux termes de :

LTCHA, 2007 S.O. 2007, c.8, s. 15. (1) Every licensee of a long-term care home shall ensure that,

- (a) there is an organized program of housekeeping for the home;
- (b) there is an organized program of laundry services for the home to meet the linen and personal clothing needs of the residents; and
- (c) there is an organized program of maintenance services for the home. 2007, c. 8, s. 15 (1).

Order / Ordre :

The home shall develop, submit and implement a plan to ensure there is an organized program of maintenance services for the home that will provide for the safety and comfort of the residents. The plan will address issues identified in the grounds for the order and will include a detailed description of the measures that will be taken to sustain the maintenance program on an on-going basis. In addition, the plan will address all deficiencies identified by the home's own comprehensive audit of resident areas in regards to general maintenance and building upkeep.

This plan shall be submitted in writing to Long Term Care Homes Inspector Monique Berger, Ministry of Health and Long Term Care Performance and Compliance Branch, Suite 403, 159 Cedar Street, Sudbury, Ontario, P3E 6A5 by November 1, 2013. Full compliance with this order shall be January 1, 2014.

Grounds / Motifs :

1. The home has not ensured there is an organized program of maintenance services for the comfort and safety of residents.

On October 18, 2013, Inspector did a follow-up inspection to the order left May 28, 2013, Inspection 2013-138151-0017. The home was to be in full compliance of the order by August 31, 2013. Inspector found that, though the home has

addressed some of the items identified by the Inspector as key examples of systemic maintenance issues, the home did not go beyond these key examples cited in the May 2013 report and has not completed remedial maintenance in all areas of the home. For example, Inspector found the following;

- despite a verbal and subsequent written request by Inspector, no evidence was provided by the home that demonstrated maintenance issues at South Centennial were discussed at Quality/Risk Management committee,
- though the audit tool has been developed, staff #5 confirms audits of maintenance and remedial work has not yet been implemented,
- though quality indicators for the maintenance program have been developed, staff #5 confirms that data in regards to these indicators has not as yet been gathered and reported to the Quality/Risk Management Committee,
- Inspector tours of the home showed the following observations:
 - Unit C remains in the same state of disrepair as per the May 28, 2013 inspection. Staff #5 confirms that, to date, the home has concentrated their remedial work in B Section.
 - Unit C maintenance issues continue: floor seams at hallway and resident bedroom alcoves intersections are splitting, widening with accumulated debris in them,
 - the one area where the floor seam intersecting the hallway was repaired is observed to have been repaired via a method that represents an equal risk of resident tripping hazard (raised metal bar approximately .5 cm high screwed into the floor),
 - Unit C: damaged and mangled wall corners
 - Unit C: wall covering becoming unglued, frayed, or torn
 - Unit C: baseboards loose or missing
 - Unit C: in resident room A, along the wall where the bed is located, the baseboard has deep depressions and has come away from the wall. In addition, and in this same room, by the window, floor seams transecting the room has split and spread open - accumulated dirt and debris in these splits.
 - Hallway by nursing station, across from the fire station, 2 large cracks in the wall from the ceiling and down 2/3 of the wall. The edges of the cracks are bubbled
 - Unit B: corner damage in corridor by room B
 - Unit B: baseboard damage in hallway by room C
 - Unit B: wall covering damage in corridor by rooms 169 (Bath Room), 179 (Mechanical Room), Rooms D,E,F,G,
 - Unit B: wall covering held to the wall by a tack in corridor leading to the



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storage room in this unit

- Unit B in room H, the metal seam cover on the floor at the entrance of the room has come unglued/unscrewed and is curling loosely upward,
- Unit B: in room H, by the window on the left, heavy and deep wall damage measuring 10 cm wide. Wall damage goes beyond the drywall.
- Unit B: in room H, 2 floor seams by the outer wall have split, spread, widened and curled up. Length of splits are 17-26 cm. Heavy accumulation of soil and dirt within these splits observed..
- Unit B: room H has persistent odor of urine
- Dining Room Lounge area by the large dining room: arm rests on the couch have tears with upholstery stuffing showing
- Entrance foyer: 4 chairs have torn upholstery on the arms of the chairs with stuffing showing
- Unit A: service room doors are damaged with heavy paint gouges and paint chips,
- Unit A, floor seams are splitting and widening at the entrance vestibules of rooms I and J, and in front of tub room.
- Unit A, at the end of both hallways near the respective exit doors, large cracks in the flooring transects both hallways. There is a difference in elevation from one side of the crack to the other,
- Unit A, in resident room I, caulking around toilet has completely come away from the base of the toilet. Dirt and grime accumulation noted here. Room has persistent odor of urine.

The Inspector's list of observations as listed above in no way represents a comprehensive audit of all home areas. Inspector observations are evidential examples that the home continues to have maintenance issues throughout the home that affect the safety and comfort of it's residents. .

(151)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Jan 01, 2014



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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 24th day of October, 2013

Signature of Inspector / *Monique M. Berger (151)*
Signature de l'inspecteur :

Name of Inspector /
Nom de l'inspecteur : MONIQUE BERGER

Service Area Office /
Bureau régional de services : Sudbury Service Area Office



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**Inspection Report under
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**Rapport d'inspection sous la
Loi de 2007 sur les foyers de
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**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**

**Sudbury Service Area Office
159 Cedar Street, Suite 403
SUDBURY, ON, P3E-6A5
Telephone: (705) 564-3130
Facsimile: (705) 564-3133**

**Bureau régional de services de
Sudbury
159, rue Cedar, Bureau 403
SUDBURY, ON, P3E-6A5
Téléphone: (705) 564-3130
Télécopieur: (705) 564-3133**

Public Copy/Copie du public

| Report Date(s) / Date(s) du Rapport | Inspection No / No de l'inspection | Log # / Registre no | Type of Inspection / Genre d'inspection |
|--|---|--------------------------------|--|
| Oct 24, 2013 | 2013_138151_0028 | S-000217-13 | Follow up |

Licensee/Titulaire de permis

**ANSON GENERAL HOSPITAL
58 Anson Dr., IROQUOIS FALLS, ON, P0K-1E0**

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

**SOUTH CENTENNIAL MANOR
240 FYFE STREET, IROQUOIS FALLS, ON, P0K-1E0**

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

MONIQUE BERGER (151)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): October 15,16,17,18,2013

**This Inspection relates to:
S-000217-13 Follow-up to order left May 28, 2013, inspection 2013-138151-0017**

During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care, Registered Staff, Personal Support Workers, Director of Support Services, Maintenance Manager, residents.

- During the course of the inspection, the inspector(s)**
- toured the home several times per day,**
 - reviewed the home's submitted remedial plan for completion of the plan submitted by the management of the home,**
 - reviewed the home's policies, procedures, protocols, and programs in regards to the Maintenance Program,**
 - reviewed the home's quality performance indicators and strategies in reference to sustaining compliance in reference to the maintenance program**
 - reviewed the home's records for incidental referred work.**

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

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 LTCHA, 2007 S.O. 2007, c.8, s. 15. Accommodation services

Specifically failed to comply with the following:

- s. 15. (1) Every licensee of a long-term care home shall ensure that,**
- (a) there is an organized program of housekeeping for the home; 2007, c. 8, s. 15 (1).**
 - (b) there is an organized program of laundry services for the home to meet the linen and personal clothing needs of the residents; and 2007, c. 8, s. 15 (1).**
 - (c) there is an organized program of maintenance services for the home. 2007, c. 8, s. 15 (1).**

Findings/Faits saillants :



The home has not ensured there is an organized program of maintenance services for the comfort and safety of residents.

On October 18, 2013, Inspector did a follow-up inspection to the order left May 28, 2013, Inspection 2013-138151-0017. The home was to be in full compliance of the order by August 31, 2013. Inspector found that, though the home has addressed some of the items identified by the Inspector as key examples of systemic maintenance issues, the home did not go beyond these key examples cited in the May 2013 report and has not completed remedial maintenance in all areas of the home. For example, Inspector found the following;

- despite a verbal and subsequent written request by Inspector, no evidence was provided by the home that demonstrated maintenance issues at South Centennial were discussed at Quality/Risk Management committee,
- though the audit tool has been developed, staff #5 confirms audits of maintenance and remedial work has not yet been implemented,
- though quality indicators for the maintenance program have been developed, staff #5 confirms that data in regards to these indicators has not as yet been gathered and reported to the Quality/Risk Management Committee,
- Inspector tours of the home showed the following observations:
 - Unit C remains in the same state of disrepair as per the May 28, 2013 inspection. Staff #5 confirms that, to date, the home has concentrated their remedial work in B Section.
 - Unit C maintenance issues continue: floor seams at hallway and resident bedroom alcoves intersections are splitting, widening with accumulated debris in them,
 - the one area where the floor seam intersecting the hallway was repaired is observed to have been repaired via a method that represents an equal risk of resident tripping hazard (raised metal bar approximately .5 cm high screwed into the floor),
 - Unit C: damaged and mangled wall corners
 - Unit C: wall covering becoming unglued, frayed, or torn
 - Unit C: baseboards loose or missing
 - Unit C: in resident room A, along the wall where the bed is located, the baseboard has deep depressions and has come away from the wall. In addition, and in this same room, by the window, floor seams transecting the room has split and spread open - accumulated dirt and debris in these splits.
 - Hallway by nursing station, across from the fire station, 2 large cracks in the wall from the ceiling and down 2/3 of the wall. The edges of the cracks are bubbled



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- Unit B: corner damage in corridor by room B
 - Unit B: baseboard damage in hallway by room C
 - Unit B: wall covering damage in corridor by rooms 169 (Bath Room), 179 (Mechanical Room), Rooms D,E,F,G,
 - Unit B: wall covering held to the wall by a tack in corridor leading to the storage room in this unit
 - Unit B in room H, the metal seam cover on the floor at the entrance of the room has come unglued/unscrewed and is curling loosely upward,
 - Unit B: in room H, by the window on the left, heavy and deep wall damage measuring 10 cm wide. Wall damage goes beyond the drywall.
 - Unit B: in room H, 2 floor seams by the outer wall have split, spread, widened and curled up. Length of splits are 17-26 cm. Heavy accumulation of soil and dirt within these splits observed..
 - Unit B: room H has persistent odor of urine
 - Dining Room Lounge area by the large dining room: arm rests on the couch have tears with upholstery stuffing showing
 - Entrance foyer: 4 chairs have torn upholstery on the arms of the chairs with stuffing showing
 - Unit A: service room doors are damaged with heavy paint gouges and paint chips,
 - Unit A, floor seams are splitting and widening at the entrance vestibules of rooms I and J, and in front of tub room.
 - Unit A, at the end of both hallways near the respective exit doors, large cracks in the flooring transects both hallways. There is a difference in elevation from one side of the crack to the other,
 - Unit A, in resident room I, caulking around toilet has completely come away from the base of the toilet. Dirt and grime accumulation noted here. Room has persistent odor of urine.

The Inspector's list of observations as listed above in no way represents a comprehensive audit of all home areas. Inspector observations are evidential examples that the home continues to have maintenance issues throughout the home that affect the safety and comfort of its residents



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soins de longue durée**

Additional Required Actions:

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

Issued on this 24th day of October, 2013

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

Monique G. Berger, Insp 151