



**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**

**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**

London Service Area Office
130 Dufferin Avenue 4th floor
LONDON ON N6A 5R2
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Bureau régional de services de
London
130 avenue Dufferin 4ème étage
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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
Mar 2, 2015	2014_217137_0036	L-000270-14	Follow up

Licensee/Titulaire de permis

THE CORPORATION OF THE COUNTY OF ELGIN MUNICIPAL HOMES
475 Talbot Street E. AYLMER ON N5H 3A5

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

TERRACE LODGE
475 TALBOT STREET EAST 49462 TALBOT LINE AYLMER ON N5H 3A5

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

MARIAN MACDONALD (137), CHAD CAMPS (609)

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): December 30 and 31, 2014

During the course of the inspection, the inspector(s) spoke with Manager of Support Services, Administrative Clerk, Activation Staff, one Registered Nurse, one Registered Practical Nurse, five (5) Personal Support Workers/Health Care Aides and one Housekeeper.

**The following Inspection Protocols were used during this inspection:
Safe and Secure Home**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

0 VPC(s)

1 CO(s)

0 DR(s)

0 WAO(s)

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 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. A previous related Compliance Order was issued during the Resident Quality Inspection (RQI) on February 27, 2014 under Log # L-000191-14 and Inspection # 2014_217137_0007.

The licensee has failed to ensure that the home is a safe and secure environment for its

residents as evidenced by:

1. A tour of the Lower South Wing revealed eight (8) resident room doors lead to the outside of the home and do not lead to a secure outside area, posing a potential risk to residents. The doors were not:
 - 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 canceled 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.

The Manager of Support Services confirmed the identified doors did not lead to a secure outside area and were not equipped with a door access control system, an audible alarm and not connected to a resident-staff communication and response system.

2. Observations, during the inspection, revealed that all hazardous substances at the home are not kept inaccessible to residents at all times.

Inspectors observed a housekeeping cart unattended, with the following chemicals accessible to residents:

Green 2 Go X 2

All Purpose Cleanser with Bleach

Quik Fill A-456-N

CBC Plus Toilet Bowl Cleaner

The staff member confirmed the housekeeping cart should not be left unattended.

The doors to Lower South and Upper South Tub Room/Eye Wash Stations were observed open, with a key attached to a wooden paint stick, hanging on a wall hook. The keys open the cupboards and are accessible to residents. One of the cupboards contained 4 containers of Arjo disinfectant and 8 containers of Arjo water additive and the other one contained 7 containers of Arjo disinfectant and 3 containers of Arjo water additive.

The Manager of Support Services confirmed hazardous substances are to be kept locked and inaccessible to residents, when no staff member is present, as chemical access poses a potential risk to residents. [s. 5.]



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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 2nd day of March, 2015

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

Original report signed by the inspector.



**Ministry of Health and
Long-Term Care**

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

**Ministère de la Santé et
des Soins de longue durée**

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) : MARIAN MACDONALD (137), CHAD CAMPS (609)

Inspection No. /

No de l'inspection : 2014_217137_0036

Log No. /

Registre no: L-000270-14

Type of Inspection /

Genre

d'inspection:

Follow up

Report Date(s) /

Date(s) du Rapport : Mar 2, 2015

Licensee /

Titulaire de permis : THE CORPORATION OF THE COUNTY OF ELGIN
MUNICIPAL HOMES
475 Talbot Street E., AYLMER, ON, N5H-3A5

LTC Home /

Foyer de SLD : TERRACE LODGE
475 TALBOT STREET EAST, 49462 TALBOT LINE,
AYLMER, ON, N5H-3A5

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur : Rhonda Duffy

To THE CORPORATION OF THE COUNTY OF ELGIN MUNICIPAL HOMES, you are hereby required to comply with the following order(s) by the date(s) set out below:



**Ministry of Health and
Long-Term Care**

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

**Ministère de la Santé et
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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(s) of the InspectorPursuant 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

Order # / Ordre no : 001	Order Type / Genre d'ordre : Compliance Orders, s. 153. (1) (a)
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Linked to Existing Order / Lien vers ordre existant:	2014_217137_0007, CO #001;
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Pursuant to / Aux termes de :

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.

Order / Ordre :

The licensee must take immediate action to achieve compliance by:

(a) ensuring that all doors leading to the outside of the home, other than doors leading to the secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be:
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 canceled 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.

(b) ensuring housekeeping carts are locked when left unattended and hazardous substances be kept inaccessible to residents.

Grounds / Motifs :

1. A previous related Compliance Order was issued during the Resident Quality Inspection (RQI) on February 27, 2014 under Log # L-000191-14 and Inspection # 2014_217137_0007.

The licensee has failed to ensure that the home is a safe and secure environment for its residents as evidenced by:

1. A tour of the Lower South Wing revealed eight (8) resident room doors lead to the outside of the home and do not lead to a secure outside area, posing a potential risk to residents. The doors were not:

- 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 canceled only at the point of activation and,
 - 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.

The Manager of Support Services confirmed the identified doors did not lead to a secure outside area and were not equipped with a door access control system, an audible alarm and not connected to a resident-staff communication and response system.

2. Observations, during the inspection, revealed that all hazardous substances at the home are not kept inaccessible to residents at all times.

Inspectors observed a housekeeping cart unattended, with the following chemicals accessible to residents:

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The keys open the cupboards and are accessible to residents. One of the cupboards contained 4 containers of Arjo disinfectant and 8 containers of Arjo water additive and the other one contained 7 containers of Arjo disinfectant and 3 containers of Arjo water additive.

The Manager of Support Services confirmed hazardous substances are to be kept locked and inaccessible to residents, when no staff member is present, as chemical access poses a potential risk to residents.

(137)



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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

**Ministère de la Santé et
des Soins de longue durée**

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

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

Aug 31, 2015



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Pursuant to section 153 and/or
section 154 of the *Long-Term Care
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de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée*, L.O. 2007, chap. 8

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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section 154 of the *Long-Term Care
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de soins de longue durée*, L.O. 2007, chap. 8

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, 11e 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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section 154 of the *Long-Term Care
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de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée, L.O. 2007, chap. 8*

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 2nd day of March, 2015

Signature of Inspector /

Signature de l'inspecteur :

Name of Inspector /

Nom de l'inspecteur : MARIAN MACDONALD

Service Area Office /

Bureau régional de services : London Service Area Office