



**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 prévue le Loi de 2007 les foyers de soins de longue**

Health System Accountability and Performance Division  
Performance Improvement and Compliance Branch  
Division de la responsabilisation et de la performance du système de santé  
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Oct 18, 31, 2012	2012_183135_0006	Critical Incident

**Licensee/Titulaire de permis**

LUTHERAN HOMES KITCHENER-WATERLOO  
2727 KINGSWAY DRIVE, KITCHENER, ON, N2C-1A7

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

TRINITY VILLAGE CARE CENTRE  
2727 KINGSWAY DRIVE, KITCHENER, ON, N2C-1A7

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

BONNIE MACDONALD (135)

**Inspection Summary/Résumé de l'inspection**

The purpose of this inspection was to conduct a Critical Incident inspection.

During the course of the inspection, the inspector(s) spoke with Administrator, Spiritual Care Provider, Program Director, 3 Registered Practical Nurses, 2 Personal Support Workers, Receptionist, Recreationist and 2 residents.

During the course of the inspection, the inspector(s) reviewed clinical health records, critical incident investigation, policies and procedures, resident care, recreation luncheon and toured home areas.

Log# L-001257-12

The following Inspection Protocols were used during this inspection:

Critical Incident Response

Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

**NON-COMPLIANCE / NON-RESPECT DES EXIGENCES**

<b>Legend</b>  WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	<b>Legendé</b>  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. 8. Policies, etc., to be followed, and records Specifically failed to comply with the following subsections:**

**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**  
**(b) is complied with. O. Reg. 79/10, s. 8 (1).**

**Findings/Faits saillants :**

1. August 1, 2012, the home put in place a protocol to ensure that confused residents who wander are supervised when attending church services in the Gathering Place on first floor.  
 As part of the home's protocol, wandering residents are identified to volunteers as wanderers by providing pictures of residents that need to be escorted to and from their home areas. This protocol was not complied with when the following was observed:

October 18, 2012, in review of church records with the Program Director for 3 residents who wander, only one (33%) had been identified with a picture as a wanderer needing to be escorted by volunteers to and from the unit.

In interview, with the home's Administrator she confirmed her expectation that the protocol for keeping resident's safe be followed when residents are attending church services.[O.Reg. 79/10, 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 ensuring residents who wander are supervised when attending church services, to be implemented voluntarily.**

**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 9. Doors in a home**

Specifically failed to comply with the following subsections:

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.

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. (1).

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**Findings/Faits saillants :**

1. Every licensee of a long term care home shall ensure the doors leading to stairways and to the outside of the home are equipped with a door access control system that is on at all times.

This requirement was not complied with, when resident was found outside in the garden unsupervised. Resident was able to exit the door leading into the garden known as the Outdoor Haven.

In interview with the home's Spiritual Care Provider, he confirmed that the door leading into the Outdoor Haven is not locked or alarmed when it is open during the day and residents can go into the garden unsupervised.

In interview with the home's Administrator, she confirmed her expectation that the door access control system needs to be on at all times to ensure all residents are protected and safe.[O. Reg. 79/10, s. 9. (1). ii]

**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 ensuring the doors leading to stairways and to the outside of the home are equipped with a door access control system that is on at all times, to be implemented voluntarily.*

Issued on this 31st day of October, 2012



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prévus le Loi de 2007 les  
foyers de soins de longue

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

*Bonnie MacDonald*