

Inspection Report under the Long-Term Care Homes Act, 2007**Rapport d'inspection en vertu de la Loi de 2007 sur les foyers de soins de longue durée**

**Long-Term Care Operations Division
Long-Term Care Inspections Branch**
Division des opérations relatives aux soins de longue durée
Inspection de soins de longue durée

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Aug 18, 2021	2021_563670_0020	011398-21	Critical Incident System

Licensee/Titulaire de permis

S & R Nursing Homes Ltd.
265 North Front Street Suite 200 Sarnia ON N7T 7X1

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

Twin Lakes Terrace Long Term Care Community
1310 Murphy Road Sarnia ON N7S 6K5

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

DEBRA CHURCHER (670)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): August 9, 11, 12, 16 and 17, 2021.

The purpose of this inspection was to inspect Log# 011398-21 CIS#2889-000020-21 related to a fall with injury.

This inspection was completed concurrently with Follow Up inspection #2021_563670_0019.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Manager of Resident Care, the Manager of Environmental Services, one Recreation Aide, one Registered Nurse, two Registered Practical Nurses, one Personal Support Worker and residents.

During the course of this inspection the Inspector observed the overall maintenance and cleanliness of the home, observed staff to resident interactions, observed the provision of care, completed relevant interviews with residents and staff, completed relevant clinical record review and completed relevant internal documentation review.

The following Inspection Protocols were used during this inspection:

Falls Prevention

Infection Prevention and Control

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)

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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

Légende

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. 21. Air temperature**Findings/Faits saillants :**

1. The licensee has failed to ensure that the temperature in the home was maintained at a minimum of 22 degrees Celsius.

Review of the home's temperature records for July and August 2021 showed that the temperature was below 22 degrees Celsius, in specific home areas utilized by residents on 45 occasions.

Resident #002 stated that they often found the temperature of the home to be very cool.

Resident #003 stated that they always found it too cold in the dining room.

During an interview with the Manager of Environmental Services (MES) #107 they stated that they take the temperatures when they are in the building and if the temperature is too high or too low they will adjust the thermostat but there is no documentation of any corrective actions. MES #107 also stated that when they are not in the building that the Registered Nurse on shift checks the temperatures and should be adjusting the thermostat if needed however they were unsure if this was ever done.

Not maintaining the temperature of the home at a minimum of 22 degrees Celsius placed residents at risk.

Sources:July and August 2021 temperature records, interviews with resident #002, #003 and MES #107. [s. 21.]

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 to ensure that the temperature in the home is maintained at a minimum of 22 degrees Celsius, to be implemented voluntarily.

Issued on this 18th day of August, 2021

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

Original report signed by the inspector.