



**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**

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

Hamilton Service Area Office  
119 King Street West, 11th Floor  
HAMILTON, ON, L8P-4Y7  
Telephone: (905) 546-8294  
Facsimile: (905) 546-8255

Bureau régional de services de  
Hamilton  
119, rue King Ouest, 11<sup>ième</sup> étage  
HAMILTON, ON, L8P-4Y7  
Téléphone: (905) 546-8294  
Télécopieur: (905) 546-8255

### **Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Jul 31, 2014	2014_189120_0044	H- 000190/191/ 192-14	Follow up

#### **Licensee/Titulaire de permis**

BENEVOLENT SOCIETY "HEIDEHOF" FOR THE CARE OF THE AGED  
600 Lake Street, St. Catharines, ON, L2N-4J4

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

HEIDEHOF LONG TERM CARE HOME  
600 Lake Street, St. Catharines, ON, L2N-4J4

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

BERNADETTE SUSNIK (120)

### **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): July 4, 2014**

**During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, registered nursing staff and personal support workers.**

**During the course of the inspection, the inspector(s) observed residents sitting in wheelchairs with front-closing restraints, reviewed the infection prevention and control policies and procedures, the current daily infection surveillance forms and previous data collected during the Scabies outbreak.**

**The following Inspection Protocols were used during this inspection:  
Infection Prevention and Control**

**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.



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**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 229. Infection prevention and control program**

**Specifically failed to comply with the following:**

**s. 229. (2) The licensee shall ensure,  
(e) that a written record is kept relating to each evaluation under clause (d) that includes the date of the evaluation, the names of the persons who participated in the evaluation, a summary of the changes made and the date that those changes were implemented. O. Reg. 79/10, s. 229 (2).**

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**Findings/Faits saillants :**

1. The licensee did not ensure that a written record of the infection prevention and control program was kept relating to each evaluation under clause (d) [that the program be evaluated and updated at least annually in accordance with prevailing practices] that included the date of the evaluation, the names of the persons who participated in the evaluation, a summary of the changes made and the date that those changes were implemented.

The home's infection prevention and control program, which included daily monitoring to detect the presence of infection in residents and measures to prevent the transmission of infections was updated in June 2014 in response to a previous inspection and findings of non-compliance in February 2014. During this inspection, procedures for daily monitoring (surveillance) were developed and were included in the home's infection control manual. The implementation of the surveillance procedures occurred between February and June 2014 by ensuring that registered staff were provided training and guidance on using the daily monitoring forms. However, a summary of the changes that were made to the surveillance program, the dates and the names of the persons who participated in the evaluation were not documented. [s. 229(2)(e)]

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**THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/  
LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT CONFORME AUX EXIGENCES:**

**COMPLIED NON-COMPLIANCE/ORDER(S)  
REDRESSEMENT EN CAS DE NON-RESPECT OU LES ORDERS:**



<b>REQUIREMENT/ EXIGENCE</b>	<b>TYPE OF ACTION/ GENRE DE MESURE</b>	<b>INSPECTION # / NO DE L'INSPECTION</b>	<b>INSPECTOR ID #/ NO DE L'INSPECTEUR</b>
O.Reg 79/10 s. 110. (1)	CO #001	2014_189120_0003	120
O.Reg 79/10 s. 229. (2)	CO #003	2014_189120_0003	120
O.Reg 79/10 s. 229. (5)	CO #002	2014_189120_0003	120

**Issued on this 31st day of July, 2014**

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