

Inspection Report Under the Fixing Long-Term Care Act, 2021

Ministry of Long-Term Care

Long-Term Care Operations Division Long-Term Care Inspections Branch

Hamilton District

119 King Street West, 11th Floor Hamilton, ON, L8P 4Y7 Telephone: (800) 461-7137

	Original Public Report
Report Issue Date: May 24, 2024	
Inspection Number: 2024-1707-0003	
Inspection Type:	
Complaint	
Licensee: Partners Community Health	
Long Term Care Home and City: Wellbrook Place East, Mississauga	
Lead Inspector	Inspector Digital Signature
Yuliya Fedotova (632)	
Additional Inspector(s)	
-	

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 1, 4-8, 11-12, 18-19 and April 2-4, 9-11, 15-16, 18 and 22, 2024.

The following intake(s) were inspected in this Complaint Inspection:

• Intake: #00106922 was related to safe and secure home.

NOTE: Post-Occupancy Inspection #2024-1707-0001 was conducted concurrently with this Complaint Inspection and a Non-Compliance Remedied (NCR) with O. Reg. 246/22, s. 12 (1) (1) was identified during both inspections, which will be issued in this Complaint Inspection Report.



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The following **Inspection Protocols** were used during this inspection:

Safe and Secure Home
Infection Prevention and Control

INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: O. Reg. 246/22, s. 12 (1) 1.

- s. 12 (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.



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The licensee of a long-term care home failed to ensure that the following rules were complied with: 1. Main exit door leading to outside of the home that precluded exit by a resident, i. had to be kept closed and locked.

Rational and Summary

During an inspection, it was observed that main sliding door, leading to outside of the home, was not locked.

The home's Facilities Operations and Support Services Manager (FOSSM) indicated that the door was on "Auto-close" mode, meaning that it was not locked.

The home's Executive Director (ED) indicated that the home was going to put more permanent solution for the door being locked, which was already approved. The new solution would be in a form of a keypad/punch code system for the sliding door at the main entrance.

Later, during an inspection, it was observed that the sliding door at the main entrance was locked at all times and anyone, who entered and/or exited the building, entered a code into a keypad/punch system or contacted the Receptionist.

Sources: Observations; interview with the FOSSM and the ED. [632]

Date Remedy Implemented: April 9, 2024