



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

**Health System Accountability and
Performance Division
Performance Improvement and
Compliance Branch**

Ottawa Service Area Office
347 Preston St Suite 420
OTTAWA ON K1S 3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347 rue Preston bureau 420
OTTAWA ON K1S 3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

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

Amended Public Copy/Copie modifiée du public de permis

Report Date(s)/ Date(s) du Rapport	Inspection No/ No de l'inspection	Log #/ Registre no	Type of Inspection / Genre d'inspection
Oct 23, 2015;	2015_178102_0026 (A1)	O-001192-14	Follow up

Licensee/Titulaire de permis

Chartwell Master Care LP
100 Milverton Drive Suite 700 MISSISSAUGA ON L5R 4H1

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

BALLYCLIFFE LODGE NURSING HOME
70 STATION STREET AJAX ON L1S 1R9

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



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

JESSICA LAPENSEE (133) - (A1)

Amended Inspection Summary/Résumé de l'inspection modifié

The compliance date of Compliance Order #001 has been extended from September 30th, 2015, to December 14th, 2015, following a request from the licensee. The licensee will submit weekly progress reports to the Ministry of Health and Long Term Care until such time that compliance is achieved.

Issued on this 23 day of October 2015 (A1)

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

Original report signed by the inspector.



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

**Health System Accountability and
Performance Division
Performance Improvement and
Compliance Branch**

Ottawa Service Area Office
347 Preston St Suite 420
OTTAWA ON K1S 3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347 rue Preston bureau 420
OTTAWA ON K1S 3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

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

Amended Public Copy/Copie modifiée du public de permis

Report Date(s)/ Date(s) du Rapport	Inspection No/ No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Oct 23, 2015;	2015_178102_0026 (A1)	O-001192-14	Follow up

Licensee/Titulaire de permis

Chartwell Master Care LP
100 Milverton Drive Suite 700 MISSISSAUGA ON L5R 4H1

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

BALLYCLIFFE LODGE NURSING HOME
70 STATION STREET AJAX ON L1S 1R9

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



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

JESSICA LAPENSEE (133) - (A1)

Amended Inspection Summary/Résumé de l'inspection modifié

The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): May 12, 2015

The follow up inspection and meeting held at the long term care home were related to ongoing non-compliance with generator availability and capacity in the event of a power outage. The meeting was held with representatives of the licensee, management staff of Ballycliffe Lodge Nursing Home. Management staff from the Performance Improvement and Compliance Branch were in attendance for the meeting and inspection. The home was toured. Maintenance of the home was also discussed during the meeting.

During the course of the inspection, the inspector(s) spoke with The President and CEO and the Senior Vice President Development, both of Chartwell Retirement Residences, representing the licensee, Chartwell Master Care LP; the Administrator, the Environmental Services Manager.

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)
- 1 DR(s)
- 0 WAO(s)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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.)</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 19. Generators



Specifically failed to comply with the following:

s. 19. (4) The licensee of a home to which subsection (2) or (3) applies shall ensure, not later than six months after the day this section comes into force, that the home has guaranteed access to a generator that will be operational within three hours of a power outage and that can maintain everything required under clauses (1) (a), (b) and (c). O. Reg. 79/10, s. 19 (4).

Findings/Faits saillants :

1. On May 12, 2015, a follow up inspection and meeting was conducted at Ballycliffe Lodge Nursing Home. The President and CEO and the Senior Vice President Development, both of Chartwell Retirement Residences, were in attendance representing the licensee, Chartwell Master Care LP. The Administrator and the Environmental Services Manager, both of Ballycliffe Lodge Nursing Home were also present during the inspection and the meeting. A Manager, a Senior Manager and Inspector # 102 participated on behalf of the Ministry of Health and Long Term Care, Performance Improvement and Compliance Branch.

It was identified during the inspection and the meeting that corrective action has not been taken or initiated to comply with compliance order (CO) # 001, follow up inspection # 2014_178102_0043, conducted September 24, 2014, with a compliance date of January 01, 2015. This was the 2nd issue of the CO (CO # 002) from Critical Incident inspection # 2014_178102_0002, conducted January 07 and 08, 2014 with a compliance date of April 30, 2014.

In a letter dated January 15, 2015, the President and CEO of Chartwell Retirement Residences identified to the Ministry of Health and Long Term Care that a "Professional Engineer" was hired "to provide further review of possible options to meet the requirements of the compliance order and the expected costs." The letter identifies that "we will not be complying with the Order at this time." A meeting was requested with the Director of the Performance Improvement and Compliance Branch.

During the previous follow up inspection conducted on September 24, 2014, the Administrator and Environmental Services Manager confirmed that no changes had been made to the on site generator capacity. The order required that the licensee ensure that the home has guaranteed access to a generator that will be operational within 3 hours of a power outage that will provide sufficient capacity to maintain everything required under clauses (1)(a)(b)and (c) of O.Reg. 79/10, s. 19(4) including the heating system; emergency lighting; and essential services.



In a letter dated May 16, 2014, the President and CEO of Chartwell Retirement Residences identified to the Ministry of Health and Long Term Care "although the home does have a generator, it is old and no longer meets the requirements of the amendments to the recent regulations. The Order requires the installation of a new generator to meet the new regulations which will cost approximately \$330,000."

A letter of response, dated June 06, 2014 was sent from the Ministry of Health and Long Term Care to the President and CEO of Chartwell Retirement Residences. The letter identified : "As a point of clarification, Compliance Order 002, relating to O.Reg 79/10, s. 19.(4), does not necessitate the installation of a new generator. As required under O.Reg. 79/10, s. 19.(4), the Licensee is required to have guaranteed access to a generator that will be operational within three hours of a power outage and that can maintain everything required under clauses (1)(a), (b) and (c). O. Reg. 79/10, s. 19(4)."

As of the date of the 2nd follow up inspection, conducted on May 12, 2015, the licensee has not made arrangements for the home to have guaranteed access to a generator that will be operational within 3 hours of a power outage, that can maintain everything required.

CO # 002, inspection # 2014 178102 0002 identified the following grounds to support the order, which remain applicable:

1. Ballycliffe Lodge Nursing Home has Class C beds within the meaning of subsection 187(18) of the Act.
2. O.Reg. 79/10, s. 19.(1) requires that the home be served by a generator that has the capacity to maintain, in the event of a power outage, the heating system; emergency lighting; and essential services
3. O.Reg. 79/10, s. 9. 4. identifies that 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.
4. Ballycliffe Lodge is equipped with 2 on-site generators. Management staff of the home identified that the generators were operational during a power outage which affected the home on December 22nd and 23rd, 2013 for a period lasting approximately 32 hours. Critical incident report (CIR) # 2658-000036-13 was submitted regarding the power outage. The CIR identified that generator back up was "functional and continued to provide essential services."
5. During an inspection conducted at the home on January 07 and 08, 2014 the CIR related to the power outage was reviewed. Generator capacity provided during the



power outage was discussed with the Administrator (Acting) and the Environmental Services Manager (ESM). A subsequent telephone discussion was held with the licensee's Corporate Environmental Services (ES) Consultant on January 09, 2014. The Administrator (Acting) and the ES Consultant were both identified to have been present in the home during the power outage.

6. Through discussion with staff of the home, review of written documentation and visual inspection of the on site generators and back up power supply panels for generators, it was identified that during the power outage which affected the home for approximately 32 hours on December 22 and 23, 2013, the 2 on site generators supplied back up power to the following:

- emergency lighting in the hallways, corridors, stairways and exits;
- circulation pump(s) for gas fired boilers for the hot water supply and the portion of the heating system that is served by hot water circulated through pipes
- the magnetic door locking system.
- fire monitoring system.
- 2 unidentified electric outlets
- fan and light inside the elevator
- the compressor motor for the walk in cooler was powered; however, the operation could not be sustained due to the lack of fan operation to cool the motor.

7. Through discussion with staff of the home, review of written documentation and visual inspection of the on site generators and back up power supply panels for generators, it was also identified that during the power outage which affected the home for approximately 32 hours on December 22 and 23, 2013 the home was not equipped with generator capacity to maintain the following:

- the heating system, which includes fans to distribute heat from the water that was identified by staff to be piped through the "PTAC"/ incremental heat units in resident bedrooms and other communal areas within the LTC home (noted that the previously installed incremental units were identified by staff to have been connected to an on site generator. The units were replaced by separate heater and portable air conditioning units during 2013).
- essential services including dietary services equipment to store food at safe temperatures and prepare and deliver meals and snacks;
- the elevator;
- the resident staff communication and response system;
- the door alarm safety system on resident accessible doors to stairways and to the outside were not operational.

8. O reg. 79/10, s. 21. requires that the air temperature within the home is maintained at a minimum of 22 degrees Celcius (72 degrees f). Staff of the home verbally identified that: air temperatures were monitored during the power outage; air



temperatures were decreasing; and were reported to be approximately 65 degrees f inside the home when the power was restored on December 23 at approximately 8 am.

9. There were no functioning refrigerators during the power outage. Staff identified that food was discarded due to the lack of refrigeration. Hot meals and hot beverages were not provided to residents and could not be prepared. The emergency menu was implemented. The freezer was identified to have provided some cold holding capacity.

10. Ventilation systems to support the operation of gas fired cooking and laundry equipment were not functional. The equipment was shut off and was not used during the power outage.

11. Prior to management receiving information related to the restoration of the power on December 23, 2013, evacuation of the home had been considered. It was also identified that consideration was being given to bringing a large capacity generator to the site which would involve arranging the connection with a licensed electrician and having the connection approved prior to use by the required power safety authority.

The licensee has not ensured that the home has guaranteed access to a generator that will be operational within 3 hours of a power outage and that can maintain everything required under O.reg.79/10, s. 19.(1), which poses an increased risk to the health, safety, comfort and well being of residents when a prolonged power outage occurs.

Additionally, it is noted that windows in the long term care home do not open. All residents' bedrooms are equipped with electric, portable, free standing, air conditioning (a/c) units. Communal areas are equipped with a combination of electric, in wall and/or free standing, a/c units. The a/c units have not been identified as being connected to, or able to be connected to a back up power supply in the event of a hot weather power outage, placing residents at increased risk of harm from hot weather related illness.

As a result of on going non compliance with the CO, a referral to the Director is being made. [s. 19. (4)]

Additional Required Actions:



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

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".

(A1)The following order(s) have been amended:CO# 001

DR # 001 – The above written notification is also being referred to the Director for further action by the Director.



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

Issued on this 23 day of October 2015 (A1)

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

Original report signed by the inspector.



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

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

Order(s) of the Inspector

Ordre(s) de l'inspecteur

Pursuant to section 153 and/or
section 154 of the Long-Term
Care Homes Act, 2007, S.O.
2007, c. 8

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**

Ottawa Service Area Office
347 Preston St, Suite 420
OTTAWA, ON, K1S-3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347 rue Preston, bureau 420
OTTAWA, ON, K1S-3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

Amended Public Copy/Copie modifiée du public de permis

Name of Inspector (ID #) /

Nom de l'inspecteur (No) : JESSICA LAPENSEE (133) - (A1)

Inspection No. /

No de l'inspection : 2015_178102_0026 (A1)

Appeal/Dir# /

Appel/Dir#:

Log No. /

Registre no. : O-001192-14 (A1)

Type of Inspection /

Genre d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : Oct 23, 2015;(A1)

Licensee /

Titulaire de permis : Chartwell Master Care LP
100 Milverton Drive, Suite 700, MISSISSAUGA, ON,
L5R-4H1

LTC Home /

Foyer de SLD : BALLYCLIFFE LODGE NURSING HOME
70 STATION STREET, AJAX, ON, L1S-1R9



Order(s) of the Inspector

Ordre(s) de l'inspecteur

Pursuant to section 153 and/or
section 154 of the Long-Term
Care Homes Act, 2007, S.O.
2007, c. 8

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

Name of Administrator / Marie Gagnon
Nom de l'administratrice
ou de l'administrateur :

To Chartwell Master Care LP, you are hereby required to comply with the following order(s) by the date(s) set out below:

Order # / Ordre no : 001	Order Type / Genre d'ordre : Compliance Orders, s. 153. (1) (b)
Linked to Existing Order / Lien vers ordre existant:	2014_178102_0043, CO #001;

Pursuant to / Aux termes de :

O.Reg 79/10, s. 19. (4) The licensee of a home to which subsection (2) or (3) applies shall ensure, not later than six months after the day this section comes into force, that the home has guaranteed access to a generator that will be operational within three hours of a power outage and that can maintain everything required under clauses (1) (a), (b) and (c). O. Reg. 79/10, s. 19 (4).

Order / Ordre :



Order(s) of the Inspector

Ordre(s) de l'inspecteur

Pursuant to section 153 and/or
section 154 of the Long-Term
Care Homes Act, 2007, S.O.
2007, c. 8

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

(A1)

The licensee will ensure the home has guaranteed access to a generator that will be operational within 3 hours of a power outage and will provide sufficient capacity to maintain everything required under clauses (1) (a), (b) and (c) of O.Reg. 79 10, s. 19(1):

- the heating system required to maintain the home at a minimum temperature of 22 degrees Celsius;
- emergency lighting in corridors, hallways and exits;
- essential services, including dietary services equipment required to store food at safe temperatures and prepare and deliver meals and snacks, the resident-staff communication and response system, elevators and life support, safety and emergency equipment, which includes safety equipment on resident accessible doors leading to stairways and the outside of the home.

The licensee will ensure that in a hot weather power outage, at least one separate designated cooling area is provided within the home for every 40 residents.

Connections made to a generator must conform to all applicable provincial and municipal codes and regulations.

The licensee is to prepare, submit and implement a plan for achieving compliance with this order. The plan is to be submitted by July 31, 2015, to the attention of: Carole Comeau, Manager, Ottawa Service Area Office. Fax # 613 569 9670.

As a result of on going non compliance with the compliance order, a referral to the Director is being made.

Grounds / Motifs :

1. On May 12, 2015, a follow up inspection and meeting was conducted at Ballycliffe Lodge Nursing Home. The President and CEO and the Senior Vice President Development, both of Chartwell Retirement Residences, were in attendance representing the licensee, Chartwell Master Care LP. The Administrator and the Environmental Services Manager, both of Ballycliffe Lodge Nursing Home were also present during the inspection and the meeting. A Manager, a Senior Manager and



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

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

Order(s) of the Inspector

Ordre(s) de l'inspecteur

Pursuant to section 153 and/or
section 154 of the Long-Term
Care Homes Act, 2007, S.O.
2007, c. 8

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

Inspector # 102 participated on behalf of the Ministry of Health and Long Term Care, Performance Improvement and Compliance Branch.

It was identified during the inspection and the meeting that corrective action has not been taken or initiated to comply with compliance order (CO) # 001, follow up inspection # 2014_178102_0043, conducted September 24, 2014, with a compliance date of January 01, 2015. This was the 2nd issue of the CO (CO # 002) from Critical Incident inspection # 2014_178102_0002, conducted January 07 and 08, 2014 with a compliance date of April 30, 2014.

In a letter dated January 15, 2015, the President and CEO of Chartwell Retirement Residences identified to the Ministry of Health and Long Term Care that a "Professional Engineer" was hired "to provide further review of possible options to meet the requirements of the compliance order and the expected costs." The letter identifies that "we will not be complying with the Order at this time." A meeting was requested with the Director of the Performance Improvement and Compliance Branch.

During the previous follow up inspection conducted on September 24, 2014, the Administrator and Environmental Services Manager confirmed that no changes had been made to the on site generator capacity. The order required that the licensee ensure that the home has guaranteed access to a generator that will be operational within 3 hours of a power outage that will provide sufficient capacity to maintain everything required under clauses (1)(a)(b)and (c) of O.Reg. 79/10, s. 19(4) including the heating system; emergency lighting; and essential services.

In a letter dated May 16, 2014, the President and CEO of Chartwell Retirement Residences identified to the Ministry of Health and Long Term Care "although the home does have a generator, it is old and no longer meets the requirements of the ammendments to the recent regulations. The Order requires the installation of a new generator to meet the new regulations which will cost approximately \$330,000."

A letter of response, dated June 06, 2014 was sent from the Ministry of Health and Long Term Care to the President and CEO of Chartwell Retirement Residences. The letter identified : "As a point of clarification, Compliance Order 002, relating to O.Reg 79/10, s. 19.(4), does not necessitate the installation of a new generator. As required under O.Reg. 79/10, s. 19.(4), the Licensee is required to have guaranteed access to a generator that will be operational within three hours of a power outage and that can



Order(s) of the Inspector

Ordre(s) de l'inspecteur

Pursuant to section 153 and/or
section 154 of the Long-Term
Care Homes Act, 2007, S.O.
2007, c. 8

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

maintain everything required under clauses (1)(a), (b) and (c). O. Reg. 79/10, s. 19(4)."

As of the date of the 2nd follow up inspection, conducted on May 12, 2015, the licensee has not made arrangements for the home to have guaranteed access to a generator that will be operational within 3 hours of a power outage, that can maintain everything required.

CO # 002, inspection # 2014 178102 0002 identified the following grounds to support the order, which remain applicable:

1. Ballycliffe Lodge Nursing Home has Class C beds within the meaning of subsection 187(18) of the Act.
2. O.Reg. 79/10, s. 19.(1) requires that the home be served by a generator that has the capacity to maintain, in the event of a power outage, the heating system; emergency lighting; and essential services
3. O.Reg. 79/10, s. 9. 4. identifies that 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.
4. Ballycliffe Lodge is equipped with 2 on-site generators. Management staff of the home identified that the generators were operational during a power outage which affected the home on December 22nd and 23rd, 2013 for a period lasting approximately 32 hours. Critical incident report (CIR) # 2658-000036-13 was submitted regarding the power outage. The CIR identified that generator back up was "functional and continued to provide essential services."
5. During an inspection conducted at the home on January 07 and 08, 2014 the CIR related to the power outage was reviewed. Generator capacity provided during the power outage was discussed with the Administrator (Acting) and the Environmental Services Manager (ESM). A subsequent telephone discussion was held with the licensee's Corporate Environmental Services (ES) Consultant on January 09, 2014. The Administrator (Acting) and the ES Consultant were both identified to have been present in the home during the power outage.
6. Through discussion with staff of the home, review of written documentation and visual inspection of the on site generators and back up power supply panels for generators, it was identified that during the power outage which affected the home for approximately 32 hours on December 22 and 23, 2013, the 2 on site generators supplied back up power to the following:
 - emergency lighting in the hallways, corridors, stairways and exits;
 - circulation pump(s) for gas fired boilers for the hot water supply and the portion of

Order(s) of the Inspector**Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or
section 154 of the Long-Term
Care Homes Act, 2007, S.O.
2007, c. 8

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

the heating system that is served by hot water circulated through pipes

-the magnetic door locking system.

-fire monitoring system.

-2 unidentified electric outlets

-fan and light inside the elevator

-the compressor motor for the walk in cooler was powered; however, the operation could not be sustained due to the lack of fan operation to cool the motor.

7. Through discussion with staff of the home, review of written documentation and visual inspection of the on site generators and back up power supply panels for generators, it was also identified that during the power outage which affected the home for approximately 32 hours on December 22 and 23, 2013 the home was not equipped with generator capacity to maintain the following:

- the heating system, which includes fans to distribute heat from the water that was identified by staff to be piped through the "PTAC"/ incremental heat units in resident bedrooms and other communal areas within the LTC home (noted that the previously installed incremental units were identified by staff to have been connected to an on site generator. The units were replaced by separate heater and portable air conditioning units during 2013).

-essential services including dietary services equipment to store food at safe temperatures and prepare and deliver meals and snacks;

-the elevator;

- the resident staff communication and response system;

- the door alarm safety system on resident accessible doors to stairways and to the outside were not operational.

8. O reg. 79/10, s. 21. requires that the air temperature within the home is maintained at a minimum of 22 degrees Celcius (72 degrees f). Staff of the home verbally identified that: air temperatures were monitored during the power outage; air temperatures were decreasing; and were reported to be approximately 65 degrees f inside the home when the power was restored on December 23 at approximately 8 am.

9. There were no functioning refrigerators during the power outage. Staff identified that food was discarded due to the lack of refrigeration. Hot meals and hot beverages were not provided to residents and could not be prepared. The emergency menu was implemented. The freezer was identified to have provided some cold holding capacity.

10. Ventilation systems to support the operation of gas fired cooking and laundry equipment were not functional. The equipment was shut off and was not used during the power outage.



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

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

Order(s) of the Inspector

Ordre(s) de l'inspecteur

Pursuant to section 153 and/or
section 154 of the Long-Term
Care Homes Act, 2007, S.O.
2007, c. 8

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

11. Prior to management receiving information related to the restoration of the power on December 23, 2013, evacuation of the home had been considered. It was also identified that consideration was being given to bringing a large capacity generator to the site which would involve arranging the connection with a licensed electrician and having the connection approved prior to use by the required power safety authority.

The licensee has not ensured that the home has guaranteed access to a generator that will be operational within 3 hours of a power outage and that can maintain everything required under O.reg.79/10, s. 19.(1), which poses an increased risk to the health, safety, comfort and well being of residents when a prolonged power outage occurs.

Additionally, it is noted that windows in the long term care home do not open. All residents' bedrooms are equipped with electric, portable, free standing, air conditioning (a/c) units. Communal areas are equipped with a combination of electric, in wall and/or free standing, a/c units. The a/c units have not been identified as being connected to, or able to be connected to a back up power supply in the event of a hot weather power outage, placing residents at increased risk of harm from hot weather related illness.

As a result of on going non compliance with the CO, a referral to the Director is being made.

(102)

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

Dec 14, 2015(A1)



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

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

Order(s) of the Inspector

Ordre(s) de l'inspecteur

Pursuant to section 153 and/or
section 154 of the Long-Term
Care Homes Act, 2007, S.O.
2007, c. 8

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

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

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



**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

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

**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

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.

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
Toronto ON M5S 2B1
Télécopieur : 416-327-7603



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

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

Order(s) of the Inspector

Ordre(s) de l'inspecteur

Pursuant to section 153 and/or
section 154 of the Long-Term
Care Homes Act, 2007, S.O.
2007, c. 8

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

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.

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
Toronto ON M5S 2B1
Télécopieur : 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 23 day of October 2015 (A1)

**Signature of Inspector /
Signature de l'inspecteur :**

**Name of Inspector /
Nom de l'inspecteur :**

JESSICA LAPENSEE - (A1)

**Service Area Office /
Bureau régional de services :**

Ottawa