



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

London Service Area Office  
291 King Street, 4th Floor  
LONDON, ON, N6B-1R8  
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Bureau régional de services de London  
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Division de la responsabilisation et de la performance du système de santé  
Direction de l'amélioration de la performance et de la conformité

**Public Copy/Copie du public**

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jan 4, 2013	2012_170203_0029	L-001819-12	Complaint

**Licensee/Titulaire de permis**

CORPORATION OF THE COUNTY OF BRUCE  
41 McGivern Street, P.O. Box 1600, WALKERTON, ON, N0G-2V0

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

BRUCELEA HAVEN LONG TERM CARE HOME - CORPORATION OF THE COUNTY OF BRUCE  
41 MCGIVERN STREET WEST, P.O. BOX 1600, WALKERTON, ON, N0G-2V0

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

CARMEN PRIESTER (203)

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



The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): December 19 and 27, 2012

During the course of the inspection, the inspector(s) spoke with the Director of Care, the Quality Services Coordinator, the Environmental Manager, the Recreation and Leisure Manager, 7 Personal Support Workers, 1 Dietary Aide, 2 Recreation and Leisure Aides, and 2 Administrative Assistants.

During the course of the inspection, the inspector(s) reviewed policies and procedures, observed storage areas for Personal Protective Equipment and reviewed documentation related to outbreak management.

The following Inspection Protocols were used during this inspection:  
Infection Prevention and Control  
Minimizing of Restraining

Findings of Non-Compliance were found during this inspection.

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

Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	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:**

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

**Findings/Faits saillants :**



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1. The licensee did not follow their policy regarding Staff Influenza Immunization which states that staff who have not received the Influenza vaccine and do not take the antiviral will not be allowed to work during an Influenza A outbreak.

Identified staff who had not received the Influenza vaccination and did not take the antiviral were allowed to work during the Influenza A outbreak.

This was confirmed by the DOC. [s. 8. (1)]

2. During an Influenza A outbreak in November 2012 residents were environmentally restrained when the home changed the keypad code on the affected home areas. Residents could not leave the home area as they were not informed of the codes. The policy of the home states that environmental restraints will only be used when there is high risk of elopement from the facility.

The DOC confirmed that the codes for the exits of the affected home areas were changed during the time the home area was in outbreak. [s. 8. (1)]

3. The Infection Prevention and Control policies have not been updated since 2003 and are not in compliance with the LTCHA and regulations.

Staff confirmed that the policies have not been updated or reviewed. [s. 8. (1)]

***Additional Required Actions:***

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

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**WN #2: 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. (8) The licensee shall ensure that there are in place,  
(a) an outbreak management system for detecting, managing, and controlling infectious disease outbreaks, including defined staff responsibilities, reporting protocols based on requirements under the Health Protection and Promotion Act, communication plans, and protocols for receiving and responding to health alerts; and O. Reg. 79/10, s. 229 (8).**

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**Findings/Faits saillants :**



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1. Outbreak policies are dated 2003 and do not define responsibilities of the staff during an outbreak.

Director of Care confirmed that communication to staff during the outbreak was posted on the infection control board in the service hallway. Six staff interviewed confirmed that there was little communication and direction was inconsistent during the outbreak. Resident's families and/or POA's were notified by the home if their resident became ill with Influenza A, otherwise the notice of the outbreak was on the radio and in the local newspaper. Staff members interviewed stated that some visitors were refused entry to the home but others were not.

Line listings were not completed accurately. On Dec 19, 2012 line listings presented to the inspector did not include a staff line listing. A Registered Nurse confirmed that only one staff had been off with respiratory symptoms and it had been written on a piece of paper which could not be located. DOC notes from the outbreak indicated that there were four staff off with illness. When ADOC presented line listings to the inspector on Dec 27, 2012 there were six staff line listed with onset dates prior to December 15, 2012.

Lab reports confirmed Influenza A on Nov 27, 2012 and all staff were permitted to work until Nov 30, 2012. Identified staff were permitted to work throughout the outbreak, some of whom had not had the flu vaccination or taken the antiviral. This was confirmed by the DOC and ADOC. [s. 229. (8) (a)]

***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 there is an outbreak management system for detecting, managing, and controlling infectious disease outbreaks, including defined staff responsibilities, reporting protocols, based on requirements under the Health Protection and Promotion Act, communication plans and protocols for receiving and responding to health alerts,, to be implemented voluntarily.***

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Long-Term Care

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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

Issued on this 4th day of January, 2013

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

A handwritten signature in cursive script that reads "Carmen Prust".



Ministry of Health and  
Long-Term Care

Ministère de la Santé et  
des Soins de longue durée

**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

**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

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

**Public Copy/Copie du public**

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**Name of Inspector (ID #) /**

**Nom de l'inspecteur (No) :** CARMEN PRIESTER (203)

**Inspection No. /**

**No de l'inspection :** 2012\_170203\_0029

**Log No. /**

**Registre no:** L-001819-12

**Type of Inspection /**

**Genre d'inspection:** Complaint

**Report Date(s) /**

**Date(s) du Rapport :** Jan 4, 2013

**Licensee /**

**Titulaire de permis :** CORPORATION OF THE COUNTY OF BRUCE  
41 McGivern Street, P.O. Box 1600, WALKERTON, ON,  
N0G-2V0

**LTC Home /**

**Foyer de SLD :** BRUCELEA HAVEN LONG TERM CARE HOME -  
CORPORATION OF THE COUNTY OF BRUCE  
41 MCGIVERN STREET WEST, P.O. BOX 1600,  
WALKERTON, ON, N0G-2V0

**Name of Administrator /**

**Nom de l'administratrice  
ou de l'administrateur :** ELEANOR MACEWEN

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**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

**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

To CORPORATION OF THE COUNTY OF BRUCE, you are hereby required to  
comply with the following order(s) by the date(s) set out below:





Ministry of Health and  
Long-Term Care

Ministère de la Santé et  
des Soins de longue durée

**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*

**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*

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<b>Order # /</b> <b>Ordre no :</b> 001	<b>Order Type /</b> <b>Genre d'ordre :</b> Compliance Orders, s. 153. (1) (a)
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**Pursuant to / Aux termes de :**

O.Reg 79/10, 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).

**Order / Ordre :**

The licensee must ensure policies are updated and complied with, specifically those related to infection control including outbreak management and environmental restraints by January 31, 2013.

**Grounds / Motifs :**



Ministry of Health and  
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**Ordre(s) de l'inspecteur**  
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de l'article 154 de la *Loi de 2007 sur les foyers  
de soins de longue durée*, L.O. 2007, chap. 8

1. This has been previously issued as a Written Notification and Voluntary Plan of Correction on October 16, 2012.

The Infection Prevention and Control policies have not been updated since 2003 and are not in compliance with the LTCHA and regulations.

Staff confirmed that the policies have not been updated or reviewed. (203)

2. During an Influenza A outbreak in November 2012 residents were environmentally restrained when the home changed the keypad code on the affected home areas. Residents could not leave the home area as they were not informed of the codes.

The policy of the home states that environmental restraints will only be used when there is high risk of elopement from the facility.

The DOC confirmed that the code for the exit of the affected home areas was changed during the time the home area was in outbreak. (203)

3. The licensee did not follow their policy regarding Staff Influenza Immunization, which states that staff who have not received the influenza vaccine and do not take the antiviral will not be allowed to work during an Influenza A outbreak.

Identified staff who had not received the Influenza vaccination were allowed to work during the Influenza A outbreak.

This was confirmed by the DOC. (203)

**This order must be complied with by /**

**Vous devez vous conformer à cet ordre d'ici le :** Jan 31, 2013



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Ministère de la Santé et  
des Soins de longue durée

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section 154 of the *Long-Term Care  
Homes Act, 2007*, S.O. 2007, c.8

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

### **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



Ministry of Health and  
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Ministère de la Santé et  
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**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*

**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*

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

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

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](http://www.hsarb.on.ca).



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## 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, 11<sup>e</sup> étage  
Ontario, ON  
M5S-2B1  
Fax: 416-327-7603

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.



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Pursuant to section 153 and/or  
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**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*

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  
Ontario, ON  
M5S-2B1  
Fax: 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](http://www.hsarb.on.ca).

**Issued on this 4th day of January, 2013**

**Signature of Inspector /**

**Signature de l'inspecteur :** 

**Name of Inspector /**

**Nom de l'inspecteur :** Carmen Priester

**Service Area Office /**

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