

Ministry of Health and Long-Term Care

Inspection Report under the Long-Term Care Homes Act, 2007 Ministére de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

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

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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Nov 1, 5, 2012	2012_184124_0004	Follow up

Licensee/Titulaire de permis

OMNI HEALTH CARE LIMITED PARTNERSHIP 1840 LANSDOWNE STREET WEST, UNIT 12, PETERBOROUGH, ON, K9K-2M9

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

BURNBRAE GARDENS LONG TERM CARE RESIDENCE 320 BURNBRAE ROAD EAST, P.O. BOX 1090, CAMPBELLFORD, ON, K0L-1L0

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

LYNDA HAMILTON (124)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with the Administrator and the maintenance staff.

During the course of the inspection, the inspector(s) checked the emergency power panel, transfer switch and generator connection and reviewed the emergency plans of the home.

The following Inspection Protocols were used during this inspection: Safe and Secure Home

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



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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)	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. 230. Emergency plans

Specifically failed to comply with the following subsections:

s. 230. (4) The licensee shall ensure that the emergency plans provide for the following:

1. Dealing with,

i. fires,

ii. community disasters,

iii. violent outbursts,

iv. bomb threats,

v. medical emergencies,

vi. chemical spills,

vii. situations involving a missing resident, and

viii. loss of one or more essential services.

2. Evacuation of the home, including a system in the home to account for the whereabouts of all residents in the event that it is necessary to evacuate and relocate residents and evacuate staff and others in case of an emergency.

3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the home.

4. Identification of the community agencies, partner facilities and resources that will be involved in responding to the emergency. O. Reg. 79/10, s. 230 (4).

## s. 230. (6) The licensee shall ensure that the emergency plans for the home are evaluated and updated at least annually, including the updating of all emergency contact information. O. Reg. 79/10, s. 230 (6).

## Findings/Faits saillants :

1. The licensee failed to comply with O.Reg. 79/10, s.230.(6) in that the emergency plans for the home have not been evaluated and updated at least annually as evidenced by the following findings:

-The home's Extended Power Failure-Loss of Utilities Procedure is dated April 1999 and does not identify the current emergency power availability

-The Home Emergency Data Base for the Municipal Disaster Plan is located in the first section of the home's Disaster Manual and contains outdated management contact information.

-The home's Loss of Heat-Winter Procedure, dated May 1999 does not identify the heat sources in the home and does not reflect the availability of heat sources using the current emergency power source.

-The Administrator confirmed that the Emergency Manual had not been updated at least annually.

2. The licensee failed to comply with O.Reg. 79/10, s.230.(4) 1.

The home's Disaster Manual does not provide emergency plans to deal with:

medical emergencies, chemical spills, loss of one or more of the essential services.



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## 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 home has emergency plans to deal with medical emergencies, chemical spills and loss of one or more essential services and that the emergency plans are evaluated and updated at least annually, to be implemented voluntarily.

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:

CORRECTED NON-COMPLIANCE/ORDER(S) REDRESSEMENT EN CAS DE NON-RESPECT OU LES ORDERS:					
REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / NO DE L'INSPECTION	INSPECTOR ID #/ NO DE L'INSPECTEUR		
O.Reg 79/10 r. 19.	CO #001	2012_035124_0002	124		

Issued on this 5th day of November, 2012

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

Lynda Samilton