

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

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

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### Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	_	Type of Inspection / Genre d'inspection	
May 1, 2014	2014_283544_0012	S-000073, 000074 -14	Complaint	

#### Licensee/Titulaire de permis

BOARD OF MANAGEMENT OF THE DISTRICT OF NIPISSING EAST 400 Olive St., NORTH BAY, ON, P1B-6J4

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

CASSELLHOLME

400 OLIVE STREET, NORTH BAY, ON, P1B-6J4

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

FRANCA MCMILLAN (544)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): April 10, 11, 2014 and was related to

Log # S-000073-14 Log # S-000074-14

During the course of the inspection, the inspector(s) spoke with Administrator, Director of Care, RAI/MDS Co-ordinator, Nursing Supervisors, Registered Staff, PSWs, Housekeeping Supervisor, Residents and Families.

During the course of the inspection, the inspector(s) walked through-out the home daily, observed daily the care and service delivery to the residents and staff to resident interactions, observed housekeeping staff perform duties, observed a dining room meal service, reviewed resident health care records and care plans, reviewed the Housekeeping, Safe Lifts and Transfer, Staffing and Dining Room Policies and Procedures, reviewed the Responsive Behaviours Program and staff education records regarding the Responsive Behaviours Program.

The following Inspection Protocols were used during this inspection: Accommodation Services - Housekeeping Personal Support Services Sufficient Staffing

Findings of Non-Compliance were found during this inspection.



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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.)	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.				
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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 LTCHA, 2007 S.O. 2007, c.8, s. 15. Accommodation services

Specifically failed to comply with the following:

- s. 15. (2) Every licensee of a long-term care home shall ensure that,
- (a) the home, furnishings and equipment are kept clean and sanitary; 2007, c. 8, s. 15 (2).
- (b) each resident's linen and personal clothing is collected, sorted, cleaned and delivered; and 2007, c. 8, s. 15 (2).
- (c) the home, furnishings and equipment are maintained in a safe condition and in a good state of repair. 2007, c. 8, s. 15 (2).

### Findings/Faits saillants:

1. Inspector interviewed Staff # 106 and walked through two care areas of the home with Staff # 106, where it was confirmed that the pictures on the walls were dusty and were not included on the duty list for cleaning. The Nurses Station in these areas of the home also had dust and built up grime in the corners of the walls, along the floor, along the baseboards and the filing cabinets.

Inspector walked through the same two care areas with Staff # 103 and identified that the pictures on the walls were very dusty, heat radiators near the floor, that were attached on the wall, were very dusty. The clocks, and pictures in certain rooms were also very dusty. The table tops in the Library had a sticky material on them and was cluttered with books and papers on the shelves and on the floor.

Staff # 103 further confirmed and identified that these areas of the home, were not on the daily routine checklist or any other checklist for cleaning by the Housekeeping Department.

The licensee did not ensure that, (a) the home, furnishings and equipment are kept clean and sanitary. [s. 15. (2) (a)]



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Issued on this 2nd day of May, 2014

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Signatu	re of Inspector(s	)/Signature o	le l'inspecte	eur ou des i	nspecteurs	
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