

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

London District
130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

Original Public Report

Report Issue Date: June 2, 2023	
Inspection Number: 2023-1259-0004	
Inspection Type: Complaint	
Licensee: Maplewood Nursing Home Limited	
Long Term Care Home and City: Cedarwood Village, Simcoe	
Lead Inspector Adiilah Heenaye (740741)	Inspector Digital Signature
Additional Inspector(s)	

INSPECTION SUMMARY

The inspection occurred on the following dates:
May 25-26, 30, 2023, with May 25, 2023 conducted on-site and May 26, 30, 2023 conducted off-site.

The following intake was inspected:
Intake: #00087630 was related to cooling requirements and air temperature.

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

Safe and Secure Home

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Cooling Requirements

NC # 001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 23 (1)

The home has failed to ensure that a written heat related illness prevention and management plan was planned in accordance with evidence-based practices that met the needs of the residents.

Rationale and Summary

The home identified their heat related illness prevention and management plan as “The Hot Weather Management” policy, dated October 30, 2021, with the referenced document; “Guidelines for the Prevention and Management of Hot Weather-Related Illness in Long-Term Care Homes” (July 2012) Ministry of Health and Long-Term Care.

The Guidelines for the Prevention and Management of Hot Weather-Related Illness in long-term care homes, issued on July 2012, and last reviewed on June 2020, reflected evidence-based practices during that period of time which was consistent with the requirements outlined in s. 20 (1) of O. Reg. 79/10.

By relying on this guideline as the sole source of evidence-based practices, the home's heat related illness prevention and management plan is not in compliance with the new regulations particularly when evidence-based practices cited in that document have changed.

Sources: Review of the home’s heat related illness prevention and management plan, dated October 30, 2021; Interview with the Administrator.

[740741]

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WRITTEN NOTIFICATION: Cooling Requirements

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 23 (2) (e)

The home's heat related illness prevention and management plan has failed to include a protocol for appropriately communicating their heat related illness prevention and management plan to residents, staff, volunteers, substitute decision-makers, visitors, the Residents' Council of the home, the Family Council of the home, if any, and others where appropriate.

Rationale and Summary

The home identified their heat related illness prevention and management plan as "The Hot Weather Management" policy, dated October 30, 2021, with the referenced document; "Guidelines for the Prevention and Management of Hot Weather-Related Illness in Long-Term Care Homes" (July 2012) Ministry of Health and Long-Term Care.

Review of the home's heat related illness prevention and management plan did not include a protocol for communicating the heat related illness prevention and management plan to staff, residents, volunteers and others.

The Administrator confirmed that the home's heat related illness prevention and management plan did not include a communication protocol.

Sources: Review of the home's heat related illness prevention and management plan, dated October 30, 2021; Interview with the Administrator.

[740741]

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WRITTEN NOTIFICATION: Cooling Requirements

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 23 (3)

The home has failed to evaluate and update their heat related illness prevention and management plan, at a minimum annually in accordance with evidence-based practices.

Rationale and Summary

The home identified their heat related illness prevention and management plan as “The Hot Weather Management” policy, dated October 30, 2021, with the referenced document; “Guidelines for the Prevention and Management of Hot Weather-Related Illness in Long-Term Care Homes” (July 2012) Ministry of Health and Long-Term Care.

The Administrator could not verify when the policy was last reviewed, but confirmed that the policy was last updated on October 30, 2021.

By failing to evaluate and update their heat related illness prevention and management plan annually, increased the risks of the home not meeting with the needs of the residents.

Sources: Interview with the Administrator; review of the home's heat related illness prevention and management plan, dated October 30, 2021.

[740741]

WRITTEN NOTIFICATION: Air Temperature

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 24 (3)

The licensee has failed to ensure that temperatures outlined in section (2) were measured and documented once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night.

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Rationale and Summary

O. Reg. 246/22, s. 24 (2), identified that air temperatures were to be measured and documented in writing in the following areas of the home:

- At least two resident bedrooms in different parts of the home.
- One resident common area on every floor of the home.

The home's temperature log was reviewed from May 15, 2023, to May 24, 2023. The home has two floors. The first floor included resident bedrooms, with a lounge and two dining rooms. The second floor included resident bedrooms, a lounge and three dining rooms.

The following temperatures were not measured and recorded for at least two resident bedrooms, that is, one room on the first floor and one room on the second floor: during the morning on ten occasions, in the afternoon on four occasions and during the evening/night on two occasions.

The following temperatures were not measured and recorded for one resident common area on every floor: during the morning on nine occasions, in the afternoon on one occasion and during the evening/night on one occasion.

Registered staff and the Administrator confirmed that the temperatures were not recorded and documented on the occasions specified above.

Failure to record air temperatures in accordance with the requirements had the potential for the home to fail initiating their heat related illness prevention and management plan for residents when required.

Sources: Daily temperature log binder; Interview with registered staff and the Administrator.

[740741]