



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
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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

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Table with 4 columns: Report Date(s) / Date(s) du Rapport, Inspection No / No de l'inspection, Log # / Registre no, Type of Inspection / Genre d'inspection. Row 1: Feb 24, 2014, 2014_189120_0012, H-000150-14, Complaint

Licensee/Titulaire de permis

MAPLEWOOD NURSING HOME LIMITED
500 QUEENSWAY WEST, SIMCOE, ON, N3Y-4R4

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

CEDARWOOD VILLAGE
500 QUEENSWAY WEST, SIMCOE, ON, N3Y-4R4

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

BERNADETTE SUSNIK (120)

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): February 11, 2014

During the course of the inspection, the inspector(s) spoke with the administrator, director of care, environmental services supervisor and non-registered staff regarding a roof leak that began on February 1, 2014.

During the course of the inspection, the inspector(s) toured the affected 2nd floor (dining room, sun room, resident rooms, utility room), reviewed maintenance records, policies and procedures and photographs of the affected areas taken on February 3, 2014.

The following Inspection Protocols were used during this inspection:



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Accommodation Services - Maintenance

Findings of Non-Compliance were found during this inspection.

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. 90. Maintenance services

Specifically failed to comply with the following:

- s. 90. (1) As part of the organized program of maintenance services under clause 15 (1) (c) of the Act, every licensee of a long-term care home shall ensure that,
- (b) there are schedules and procedures in place for routine, preventive and remedial maintenance. O. Reg. 79/10, s. 90 (1).



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Findings/Faits saillants :

The licensee did not ensure that there were schedules and procedures in place for routine, preventive and remedial maintenance for the exterior components of the building.

The home's preventive maintenance program failed to include any exterior building components to their schedule of maintenance checks. Beginning on February 1, 2014, as the outdoor air temperature warmed, melting snow overwhelmed the drainage system and began to seep down into the various layers of roofing material and down through to the ceiling on the 2nd floor. Several resident rooms, a dining room, a med room, a soiled utility room and the corridor near the nurse's station were affected. Multiple buckets were used to collect the dripping water between February 1 and February 3, 2014 until the water on the roof could be managed. A roofing company attended to the roof on February 3, 2014 and temporarily patched the roof where they assumed the water had penetrated the roofing materials. During the inspection on February 11, 2014, all water damaged materials had been replaced except for a number of ceiling tiles.

The home's maintenance program for the roof was remedial in nature, having a roofer respond to each episode of leaking. Many service reports were reviewed indicating date and scope of the work performed. According to staff, the roof had leaked routinely over the last 20 years. Evidence of past leaks were evident in various resident rooms, where the ceiling was patched. Preventive maintenance documentation of the roof could not be provided that identified whether or not qualified in home staff or an external contractor inspected the roof and other components to ensure that the roof would remain in good condition. The home's maintenance procedures were reviewed and no roofing procedures were available which would identify duties and responsibilities, if any for in home staff. [s. 90(1)(b)]

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 are schedules and procedures in place for routine, preventive and remedial maintenance for the exterior of the building, to be implemented voluntarily.



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Issued on this 24th day of February, 2014

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

B. Susnik