



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

Division de la responsabilisation et de la
performance du système de santé
Direction de l'amélioration de la
performance et de la conformité

Hamilton Service Area Office
119 King Street West, 11th Floor
HAMILTON, ON, L8P-4Y7
Telephone: (905) 546-8294
Facsimile: (905) 546-8255

Bureau régional de services de
Hamilton
119, rue King Ouest, 11^{ième} étage
HAMILTON, ON, L8P-4Y7
Téléphone: (905) 546-8294
Télécopieur: (905) 546-8255

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Oct 18, 2013	2013_189120_0067	H-000580- 13	Complaint

Licensee/Titulaire de permis

CHARTWELL MASTER CARE LP
100 Milverton Drive, Suite 700, MISSISSAUGA, ON, L5R-4H1

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

CHATEAU GARDENS NIAGARA LONG TERM CARE CENTRE
120 WELLINGTON STREET, P.O. BOX 985, NIAGARA-ON-THE-LAKE, ON, L0S-1J0

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): September 27, 2013

During the course of the inspection, the inspector(s) spoke with the administrator, director of care, associate director of care (designated infection control lead), environmental services supervisor, housekeeping and registered staff and residents.

During the course of the inspection, the inspector(s) toured the entire building which included resident rooms, common areas and bathing rooms, observed the home's general state of sanitation, reviewed housekeeping policies, procedures and cleaning schedules, reviewed the home's infection prevention and control program related to hand hygiene and cleaning of personal care equipment and supplies.

The following Inspection Protocols were used during this inspection:
Accommodation Services - Housekeeping

Infection Prevention and Control

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



<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>
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WN #1: 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. (4) The licensee shall ensure that all staff participate in the implementation of the program. O. Reg. 79/10, s. 229 (4).

Findings/Faits saillants :



Staff do not participate in the implementation of the infection prevention and control program.

The home's infection prevention and control program includes specific cleaning and disinfection practices for both housekeeping staff and health care aides. On September 27, 2013 at 10:30 a.m., 2 identified resident washrooms were observed to be soiled with feces. One washroom had evidence of someone having attempted to clean feces from the floor, but was still visibly soiled and a soiled brief was jammed into a small waste receptacle. The other room had feces stuck to the frame of a commode chair. Both rooms were checked again at 1:45 p.m. with no change. When other resident washrooms were toured between 10:30 and 12:15 p.m., one identified washroom had a brief stuffed into a small receptacle and other washrooms had either dusty bed pans (2), unlabeled bed pans (3) or bed pans stored on the floor (1).

According to both a registered staff member and nursing management staff, it is the expectation that health care aides clean fecal matter and urine from equipment and surfaces, ensure that soiled briefs are disposed of properly and ensure that resident's personal care items(urinals, bed pans and wash basins) are labeled, stored properly, maintained clean and free of odours. Health care aides are expected to conduct routine rounds of resident rooms and are to ensure that these issues are managed. Housekeeping staff have a daily cleaning schedule and were observed cleaning the resident rooms on the 2nd floor in a particular sequence, however by the time they attempted to clean the identified washrooms it was well after 2:30 p.m. [s. 229(4)]

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 staff participate in the implementation of the infection and control program, to be implemented voluntarily.



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Issued on this 18th day of October, 2013

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

B. Sosnik