



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**

Ottawa Service Area Office
347 Preston St, 4th Floor
OTTAWA, ON, K1S-3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

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347, rue Preston, 4ièm étage
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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**

Public Copy/Copie du public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jan 25, 2013	2013_204133_0002	O-00211-12	Follow up

Licensee/Titulaire de permis

DUNDAS MANOR LIMITED
533 CLARENCE STREET, P.O. BOX 970, WINCHESTER, ON, K0C-2K0

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

DUNDAS MANOR NURSING HOME
533 CLARENCE STREET, P.O. BOX 970, WINCHESTER, ON, K0C-2K0

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

JESSICA LAPENSEE (133)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): January 18, 2013

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, the Department head for the housekeeping, laundry and maintenance programs, the Maintenance Supervisor, the Maintenance Assistant

During the course of the inspection, the inspector(s) assessed door security throughout 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	
<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. 9. Doors in a home



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Specifically failed to comply with the following:

s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be,

- i. kept closed and locked,
- ii. equipped with a door access control system that is kept on at all times, and
- iii. equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,

- A. is connected to the resident-staff communication and response system, or
- B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door. O. Reg. 79/10, s. 9. (1).

2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents. O. Reg. 79/10, s. 9. (1).

3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency. O. Reg. 79/10, s. 9. (1).

4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9. (1).

Findings/Faits saillants :



1. Audible door alarms on applicable doors throughout the home are connected to a computer within the unit 1 and 2 nurses' station office. This computer runs, among other programs, the primary resident care documentation software used by nursing staff. Door alarms will sound automatically if the magnetic lock on the door fails or, after 30 minutes, if the door has been opened and has not been fully closed and therefore is not locked. The maintenance supervisor can also run a test program which will cause a door alarm to sound. During the inspection, on January 18th 2013, the home's maintenance supervisor ran the alarm test program and then accompanied the inspector to the unit 1 and 2 nurses' station office. The alarm software was not running and therefore by looking at the computer monitor, one could not see the location of the alarm which was sounding. Only by closing the program that was running at the time, opening the alarm software and logging in with his password could the maintenance supervisor show the inspector the source of the alarm. This set up does not meet the requirement that the door alarm be connected to an audio visual enunciator because the source of the alarm is not always visually displayed. As well, the audio visual enunciator must be connected to the nurses' station nearest the door. There is no such equipment in place at the unit 3 and 4 nurse station to capture alarms from exit doors within those units.

When the home's maintenance supervisor gained access to the alarm software on the computer, he demonstrated to the inspector that he was able to cancel the alarm from the computer, which is not the point of activation. This does not meet the requirement that doors must be equipped with audible door alarms that allow calls to be cancelled only at the point of activation.

While resident accessible doors that lead to stairwells and that lead to unsecured outside areas are equipped with audible door alarms, the licensee has failed to comply with O. Reg 79/10, s.9.(1).1.iii in that the alarms can be cancelled from locations other than the point of activation. As well, the audible door alarms are not connected to the resident-staff communication and response system OR connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door. The exception is the home's front door which is equipped as required with an audible door alarm that can only be cancelled at the point of activation and is connected to the resident-staff communication and response system. [s. 9. (1) 1. iii.]



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Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".

**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:**

COMPLIED 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 s. 36.	CO #902	2012_029134_0004	133

Issued on this 25th day of January, 2013

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

Jessica Lapensée



Ministry of Health and
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Ministère de la Santé et
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Order(s) of the Inspector
Pursuant to section 153 and/or
section 154 of the *Long-Term Care
Homes Act, 2007, S.O. 2007, c.8*

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou
de l'article 154 de la *Loi de 2007 sur les foyers
de soins de longue durée, L.O. 2007, chap. 8*

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

Public Copy/Copie du public

Name of Inspector (ID #) /

Nom de l'inspecteur (No) : JESSICA LAPENSEE (133)

Inspection No. /

No de l'inspection : 2013_204133_0002

Log No. /

Registre no: O-00211-12

Type of Inspection /

Genre d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : Jan 25, 2013

Licensee /

Titulaire de permis : DUNDAS MANOR LIMITED
533 CLARENCE STREET, P.O. BOX 970,
WINCHESTER, ON, K0C-2K0

LTC Home /

Foyer de SLD : DUNDAS MANOR NURSING HOME
533 CLARENCE STREET, P.O. BOX 970,
WINCHESTER, ON, K0C-2K0

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur :

~~ROSS ALGUIRE~~ JL

BERNARD BOUCHARD JL

To DUNDAS MANOR LIMITED, you are hereby required to comply with the following order(s) by the date(s) set out below:



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Order(s) of the Inspector
Pursuant to section 153 and/or
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Order # /

Order Type /

Ordre no : 001

Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Linked to Existing Order /

Lien vers ordre existant: 2012_054133_0038, CO #001;

Pursuant to / Aux termes de :

O.Reg 79/10, s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be,

- i. kept closed and locked,
- ii. equipped with a door access control system that is kept on at all times, and
- iii. equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,

A. is connected to the resident-staff communication and response system, or

B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.

1.1. All doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, must be equipped with locks to restrict unsupervised access to those areas by residents.

2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents.

3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.

4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9. (1).

Order / Ordre :



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The licensee will ensure that the audible door alarms in place on all resident accessible doors leading to stairways and leading to unsecured outside areas can only be cancelled at the point of activation AND are connected to the resident-staff communication and response system OR connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.

Grounds / Motifs :

1. Audible door alarms on applicable doors throughout the home are connected to a computer within the unit 1 and 2 nurses' station office. This computer runs, among other programs, the primary resident care documentation software used by nursing staff. Door alarms will sound automatically if the magnetic lock on the door fails or, after 30 minutes, if the door has been opened and has not been fully closed and therefore is not locked. The maintenance supervisor can also run a test program which will cause a door alarm to sound. During the inspection, on January 18th 2013, the home's maintenance supervisor ran the alarm test program and then accompanied the inspector to the unit 1 and 2 nurses' station office. The alarm software was not running and therefore by looking at the computer monitor, one could not see the location of the alarm which was sounding. Only by closing the program that was running at the time, opening the alarm software and logging in with his password could the maintenance supervisor show the inspector the source of the alarm. This set up does not meet the requirement that the door alarm be connected to an audio visual enunciator because the source of the alarm is not always visually displayed. As well, the audio visual enunciator must be connected to the nurses' station nearest the door. There is no such equipment in place at the unit 3 and 4 nurse station to capture alarms from exit doors within those units.

When the home's maintenance supervisor gained access to the alarm software on the computer, he demonstrated to the inspector that he was able to cancel the alarm from the computer, which is not the point of activation. This does not meet the requirement that doors must be equipped with audible door alarms that allow calls to be cancelled only at the point of activation.

While resident accessible doors that lead to stairwells and that lead to unsecured outside areas are equipped with audible door alarms, the licensee has failed to comply with O. Reg 79/10, s.9.(1).1.iii in that the alarms can be cancelled from locations other than the point of activation. As well, the audible



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door alarms are not connected to the resident-staff communication and response system OR connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door. The exception is the home's front door which is equipped as required with an audible door alarm that can only be cancelled at the point of activation and is connected to the resident-staff communication and response system.

(133)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Mar 15, 2013



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REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

Director
c/o Appeals Coordinator
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603



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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the Director

Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

Director
c/o Appeals Coordinator
Performance Improvement and Compliance
Branch
Ministry of Health and Long-Term Care
1075 Bay Street, 11th Floor
TORONTO, ON
M5S-2B1
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.



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RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

La demande de réexamen doit être présentée par écrit et est signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au titulaire de permis.

La demande de réexamen doit contenir ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le titulaire de permis souhaite que le directeur examine;
- c) l'adresse du titulaire de permis aux fins de signification.

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11^e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



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En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la
conformité
Ministère de la Santé et des Soins de longue durée
1075, rue Bay, 11e étage
Ontario, ON
M5S-2B1
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this 25th day of January, 2013

**Signature of Inspector /
Signature de l'inspecteur :**

**Name of Inspector /
Nom de l'inspecteur :**

JESSICA LAPENSEE

Service Area Office /

Bureau régional de services : Ottawa Service Area Office