



**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**

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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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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jul 14, 2014	2014_140158_0012	S-0498- 13,S-0499- 13,S-0500- 13	Follow up

Licensee/Titulaire de permis

CORPORATION OF THE CITY OF TIMMINS
481 Melrose Blvd., TIMMINS, ON, P4N-5H3

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

GOLDEN MANOR
481 MELROSE BOULEVARD, TIMMINS, ON, P4N-5H3

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

KELLY-JEAN SCHIENBEIN (158)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): June 24-26, 2014

During the course of the inspection, the inspector(s) spoke with Director of Care (DOC), Clinical Care Coordinator, Environmental Service Manager, maintenance staff, Registered nursing staff, personal support workers (PSW), and residents.

During the course of the inspection, the inspector(s) Walked through resident home areas, reviewed home policies, training documents and operating manuals related to mechanical lifts and slings, observed staff to resident care delivery, observed the operation of ceiling lifts in one area, reviewed the maintenance records of ceiling lists and reviewed resident health care records.

The following Inspection Protocols were used during this inspection:

Accommodation Services - Maintenance

Personal Support Services

Responsive Behaviours

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. (2) The licensee shall ensure that procedures are developed and implemented to ensure that,
(a) electrical and non-electrical equipment, including mechanical lifts, are kept in good repair, and maintained and cleaned at a level that meets manufacturer specifications, at a minimum; O. Reg. 79/10, s. 90 (2).**

Findings/Faits saillants :



1. The licensee did not ensure that procedures were developed and implemented to ensure that electrical and non-electrical equipment, including mechanical lifts, are kept in good repair, and maintained and cleaned at a level that meets manufacturer specifications.

On June 25, 2014, Inspector # 158 observed staff # S-100 and S-101 use the ceiling lift to transfer resident # 02 from the bed into a wheel chair (w/c). The staff stated that part of the transfer process is to press the lift's remote button so that the ceiling lift motor returns to "home", click into place and recharge.

The Inspector noted that when the staff pressed the button, the motor's movement was not fluid as it juttred, grinded and squealed across the track. The lift motor did not return to the home base automatically but required the staff to manually pull the motor and click it into place.

When questioned, the staff stated to the Inspector that this ceiling lift had not been functioning like the other ceiling lifts on the unit.

The staff added that they fill out a maintenance requisition, when there is a problem with the ceiling lift operation and had already done so for this lift.

The Inspector spoke with the Environmental Service Manager, who verified that a requisition is filled out or written in the vendor's binder. Upon request, the Environmental Service Manager produced a requisition regarding the above problem and stated to the Inspector that the vendor was in to correct the problem, four days later. The Inspector noted that the same problem ("lift not returning home") for the same ceiling lift was written in the vendor's binder three days, after the vendor had been in to correct the problem.

The Inspector conducted a random audit of the ceiling lifts on this unit on June 25, 2014.

The following was noted:

- the ceiling lift in three residents' rooms did not readily return "home" and click into place to be recharged, when the remote button was pressed
- the foam in the carry bar of ceiling lifts in five residents' rooms were either disintegrated or not present and needing to be replaced
- the lift straps of ceiling lifts in six residents' rooms were frayed

A copy of the 2013 "Checklist and Inspection" completed by the vendor identified that 15 ceiling lifts of the 18 lifts inspected, failed as a result of either missing track pins, foam needing replacing, fraying lift straps, cracked end stops, or loose brackets. The Director of Care could not confirm whether the failed elements in the vendor's inspection were corrected.

The licensee did not ensure that the ceiling lifts in one unit were kept in good repair and maintained at a level that meets manufacturer specifications. [s. 90. (2) (a)]



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 ensuring that all ceiling lifts, especially in one unit are inspected and that the deficiencies identified in the 2013 " Checklist and Inspection" are corrected, to be implemented voluntarily.

**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. 23.	CO #001	2013_139163_0032	158
O.Reg 79/10 s. 53. (3)	CO #001	2013_139163_0031	158
LTCHA, 2007 S.O. 2007, c.8 s. 76. (4)	CO #002	2013_139163_0032	158

Issued on this 14th day of July, 2014

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