



Ministry of Health and Long-Term Care

Inspection Report under the Long-Term Care Homes Act, 2007

Ministère de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance

Division Performance Improvement and Compliance Branch

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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Dec 13, 19, 2011; Jan 5, 6, 10, 2012	2011_093145_0033	Complaint

Licensee/Titulaire de permis

HANOVER NURSING HOME LIMITED
700 19TH AVENUE, HANOVER, ON, N4N-3S6

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

HANOVER CARE CENTRE
700-19TH AVENUE, HANOVER, ON, N4N-3S6

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

KARIN MUSSART (145)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Complaint inspection.

During the course of the inspection, the inspector(s) spoke with The Administrator; the Director of Care.

During the course of the inspection, the inspector(s) Reviewed the policy and procedures relating to infection control (A-10 and A-12) effective date March 24, 2004; reviewed the critical incident reporting policy under Administrative Services #30-155 effective date Dec. 24, 1998; reviewed minutes from previous Health and Safety/Infection Control meeting dated April 17, 2011.

The following Inspection Protocols were used during this inspection:

Critical Incident Response

Infection Prevention and Control

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
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.)	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 8. Policies, etc., to be followed, and records
Specifically failed to comply with the following subsections:

s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,
(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and
(b) is complied with. O. Reg. 79/10, s. 8 (1).

Findings/Faits saillants :

- Home is not in compliance with their policy relating to holding infection control committee meetings quarterly. Last meeting held was April 2011.
[O.Reg. 79/10, s.8. (1)(b)]
- No current policy exists for reporting critical incidents under the LTCHA , 2007. The existing policy is dated Dec. 24, 1998.
[O.Reg. 79/10, s.8. (1)(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 to ensure that the Home has mandated policies and procedures in place and that they are followed, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 107. Reports re critical incidents

Specifically failed to comply with the following subsections:

s. 107. (1) Every licensee of a long-term care home shall ensure that the Director is immediately informed, in as much detail as is possible in the circumstances, of each of the following incidents in the home, followed by the report required under subsection (4):

1. An emergency, including loss of essential services, fire, unplanned evacuation, intake of evacuees or flooding.
 2. An unexpected or sudden death, including a death resulting from an accident or suicide.
 3. A resident who is missing for three hours or more.
 4. Any missing resident who returns to the home with an injury or any adverse change in condition regardless of the length of time the resident was missing.
 5. An outbreak of a reportable disease or communicable disease as defined in the Health Protection and Promotion Act.
 6. Contamination of the drinking water supply. O. Reg. 79/10, s. 107 (1).
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Findings/Faits saillants :

1. Home had a communicable disease outbreak. The Home did not report this to the Director.
[O.Reg. 79/10, s.107. (1) 5.]

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 the Director is informed of outbreaks of reportable diseases, to be implemented voluntarily.

WN #3: 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 subsections:

- s. 229. (2) The licensee shall ensure,
- (a) that there is an interdisciplinary team approach in the co-ordination and implementation of the program;
 - (b) that the interdisciplinary team that co-ordinates and implements the program meets at least quarterly;
 - (c) that the local medical officer of health is invited to the meetings;
 - (d) that the program is evaluated and updated at least annually in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices; and
 - (e) that a written record is kept relating to each evaluation under clause (d) that includes the date of the evaluation, the names of the persons who participated in the evaluation, a summary of the changes made and the date that those changes were implemented. O. Reg. 79/10, s. 229 (2).
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Findings/Faits saillants :

1. Policy and procedures relating to infection control were last updated March 24, 2004. No updates were found to support the program being updated at least annually.
[O.Reg. 79/10, s.229. (2)(d)]

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 the Infection Control Program includes, to be implemented voluntarily.



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Long-Term Care

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the Long-Term Care
Homes Act, 2007

Ministère de la Santé et des
Soins de longue durée

Rapport d'inspection
prévus le Loi de 2007 les
foyers de soins de longue

Issued on this 10th day of January, 2012

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

A handwritten signature in black ink, appearing to be "H.C. [unclear]".