



**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 sous la
Loi de 2007 sur les foyers de
soins de longue durée**

**Long-Term Care Homes Division
Long-Term Care Inspections Branch**

**Division des foyers de soins de
longue durée
Inspection de soins de longue durée**

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Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Jan 29, 2018	2018_482640_0003	000439-18	Critical Incident System

Licensee/Titulaire de permis

King Nursing Home Limited
49 Sterne Street Bolton ON L7E 1B9

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

King Nursing Home
49 Sterne Street Bolton ON L7E 1B9

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

HEATHER PRESTON (640)

Inspection Summary/Résumé de l'inspection



The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): December 28, 29, 30 and 31, 2017, and January 2, 3 and 5, 2018.

Critical Incident log #000439-18, related to the loss of hot water was inspected.

This inspection was conducted concurrently with;

a) Follow Up Inspection log #029788-17 related to a Compliance Order issued December 29, 2017, related to not following the home's policy regarding the loss of heat and,

b) Complaint inspection log #2017_482640_0025 / 028669-17, 029761-17 related to loss of heat in the home. Compliance Orders were issued related to;

- 1) s. 8(1)(b) related to the home not complying with the home's policy,**
- 2) s. 90(2) related to failing to ensure there were procedures developed and implemented to ensure that heating, ventilation and air conditioning systems were inspected at least every six months by a certified individual,**
- 3) s. 19(1) related to failure to ensure that residents were not neglected by staff as it related to the loss of heat and,**
- 4) s. 90(1) related to failure to ensure there were schedules and procedures in place for routine remedial and preventive maintenance, specifically related to the heating systems in the home.**

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, the Assistant Director of Care, the home's two heat/water contractors, Registered Nurses, Registered Practical Nurse, Personal Support Workers, Dietary Supervisor, Environmental Manager and the Director of Resident and Family Services.

During the course of the inspection, the Inspector toured the home, reviewed policy/procedure, observed staff and collected water temperatures from resident room basins, tub rooms and shower rooms.

The following Inspection Protocols were used during this inspection:



Safe and Secure Home

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

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. 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,

(i) the temperature of the hot water serving all bathtubs and showers used by residents is maintained at a temperature of at least 40 degrees Celsius; O. Reg. 79/10, s. 90 (2).

Findings/Faits saillants :

1. As part of the organized program of maintenance services under clause 15 (1) (c) of the LTCH Act 2007, the licensee failed to ensure the temperature of the hot water serving all bathtubs and showers used by residents was maintained at a temperature of at least 40 degrees Celsius.

During a Critical Incident inspection, the home's administrator acknowledged to the Long Term Care Homes (LTCH) Inspector that a primary boiler temporarily failed on December 5, 2017, and was repaired December 6, 2017. Shortly thereafter, a heat exchanger failed on or about December 11, 2017. On January 5, 2018, at approximately 0200 hours, the primary boiler completely failed. The loss of both heating units resulted in a loss of heat for the west wing of the building and a loss of hot water for the entire building. As part of the licensee's remedial program, HVAC companies were contacted to repair the various systems in the building.

The home's policy, "Systems Temperature Control", policy #V-C-10.40 with a revised date of January 2015, directed the Environmental Manager (EM) to "ensure resident hot water supply temperatures were consistently maintained between 40 and 49 degrees Celsius (C)" and "water serving all resident tubs, shower rooms and hand basins used by residents does not exceed 49 degrees C". The policy directed staff to monitor water temperatures once per shift in random locations and to ensure the water serving all bathtubs and showers were maintained between 40 and 49 degrees C.

During the inspection the LTCH Inspector reviewed the licensee's documented water temperatures entitled "Water Temperature Record". Records for all three floors were reviewed by the LTCH Inspector for the months of October, November, December 2017



and January 2018.

During an interview with RPN #118 and RN #119, they told the LTCH Inspector they alternated which resident room the water temperatures were taken in. They reviewed the "Water Temperature Record" and confirmed that no water temperatures were taken in any shower room or tub room. The RPN and the RN acknowledged that there was a requirement to take the water temperatures in the tub and shower rooms.

During an interview with the Director of Care (DOC) and the Administrator on January 3, 2018, they acknowledged that staff were expected to monitor water temperatures in the bathtubs and shower rooms. The LTCH Inspector, DOC and the Administrator reviewed the documented water temperatures for October, November and December 2017 and January 2018 and acknowledged that staff did not monitor the bathtub or shower room water temperatures as per the home's policy.

During an interview with the EM, they acknowledged that on January 4, 2018, the home was not able to provide the required hot water temperatures to the home. As a result, the resident's did not receive their scheduled showers. The EM acknowledged as of January 5, 2018, at 0230 hours, the home was no longer able to provide hot water at the required temperature to the home. On January 5, 2018, the residents were evacuated from the home. [s. 90. (2) (i)]

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 the temperature of the hot water serving all bathtubs and showers used by residents is maintained at a temperature of at least 40 degrees Celsius, to be implemented voluntarily.



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Issued on this 26th day of February, 2018

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

Original report signed by the inspector.