



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

**Rapport d'inspection
prevue le *Loi de 2007
les foyers de soins de
longue durée***

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

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système de santé
Direction de l'amélioration de la performance et de la
conformité

Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
15 and 16 February 2011	2011_127_9551_14Feb142330	Critical Incident # H-00371
Licensee/Titulaire		
The Regional Municipality of Niagara, 2201 St. David's Road, P.O. Box 344, Thorold ON L2V 3Z3		
Long-Term Care Home/Foyer de soins de longue durée		
Linhaven, 403 Ontario Street, St. Catharines ON L2N 1L5		
Name of Inspector(s)/Nom de l'inspecteur(s)		
Richard Hayden, Long Term Care Homes Inspector – Environmental Health #127		
Inspection Summary / Sommaire d'inspection		
<p>The purpose of this inspection was to conduct a critical incident inspection related to a security system failure.</p> <p>During the course of the inspection, the inspector spoke with the administrator, director of care, manager of dementia care, manager of housekeeping and laundry, maintenance coordinator, registered and non-registered nursing staff, housekeeping staff, laundry staff, maintenance staff, residents and residents' family members.</p> <p>During the course of the inspection, the inspector checked all magnetically locked doors and identified safety and security issues in the home.</p> <p>The following Inspection Protocols were used during this inspection:</p> <ul style="list-style-type: none"> • Safe and Secure Home <p>Findings of Non-Compliance were found during this inspection. The following action was taken:</p> <p>4 WN 2 VPC</p>		

NON-COMPLIANCE / Non-respectés

Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 suivant constituer un avis d'écrit de l'exigences prevue le paragraph 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prevue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The Licensee has failed to comply with O. Reg. 79/10, s. 9.1.(i):

9. 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 must be,
 - (i) kept closed and locked,

Findings:

On 15 February 2011, the inspector observed that:

1. the door leading to the stairway from the main floor near the administration offices to the Merritt resident home area was not locked, and
2. the door leading to the stairway from the main floor near the nursing station in Brock House resident home area to the Merritt resident home area was not locked.

Additional 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, to be implemented voluntarily, for achieving compliance with ensuring all doors leading to stairways are kept locked.

WN #2: The Licensee has failed to comply with O. Reg. 79/10, s. 9. 2.:

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

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

Findings:

On both 15 February 2011 and 16 February 2011, the inspector observed that the magnetic lock for a door leading from the main hallway to a non-resident area hallway did not engage every time and the red light on the key pad did not illuminate to indicate the door was locked. This door led to the kitchen/ laundry areas and a receiving area which had an unlocked door leading to the outside.

WN #3: The Licensee has failed to comply with O. Reg. 79/10, s. 17(1)(a):

17. (1) Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that,

(a) can be easily seen, accessed and used by residents, staff and visitors at all times;

Findings:

On 15 February 2011, the inspector identified 17 washroom call bell cords in two resident home areas that were inaccessible to residents while seated on the toilet.

Additional Actions:

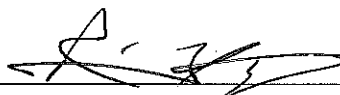
VPC - pursuant to the *Long-Term Care Homes Act, 2007*, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction, to be implemented voluntarily, for achieving compliance with ensuring that all call bell cords can be easily seen, accessed and used by residents, staff and visitors at all times.

WN #4: The Licensee has failed to comply with O. Reg. 79/10, s. 91:

91. Every licensee of a long-term care home shall ensure that all hazardous substances at the home are labelled properly and are kept inaccessible to residents at all times.

Findings:

On both 15 February 2011 and 16 February 2011, the inspector observed a Shower/Tub room can be entered through a shared unlocked door with a resident-accessible washroom. A bottle of disinfectant in the shower/tub room was accessible to residents on each day.

<p>Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné</p>	<p>Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.</p> 
<p>Title: _____ Date: _____</p>	<p>Date of Report (if different from date(s) of inspection). 11 May 2011</p>