Ontario

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

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

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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
Sep 30, 2013	2013_189120_0065	H-000601-13	Complaint

Licensee/Titulaire de permis

DALLOV HOLDINGS LIMITED
441 MAPLE AVENUE, BURLINGTON, ON, L7S-1L8

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

MAPLE VILLA LONG TERM CARE CENTRE
441 MAPLE AVENUE, BURLINGTON, ON, L7S-1L8

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

BERNADETTE SUSNIK (120)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): September 25, 2013

During the course of the inspection, the inspector(s) spoke with the administrator and maintenance personnel

During the course of the inspection, the inspector(s) tested the passenger elevator, reviewed elevator preventive maintenance logs, loss of power emergency plans, maintenance policies and procedures, an internal incident report regarding the passenger elevator and a Ministry of Labour inspection report dated September 18, 2013.

The following Inspection Protocols were used during this inspection:
Accommodation Services - Maintenance

Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	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. 19. Generators Specifically failed to comply with the following:

s. 19. (4) The licensee of a home to which subsection (2) or (3) applies shall ensure, not later than six months after the day this section comes into force, that the home has guaranteed access to a generator that will be operational within three hours of a power outage and that can maintain everything required under clauses (1) (a), (b) and (c). O. Reg. 79/10, s. 19 (4).

Findings/Faits saillants :

The licensee did not have guaranteed access to a generator on September 25, 2013 that could be operational within 3 hours of a power outage and that can maintain all essential services such as the resident-staff communication and response system and elevators.

The home currently has a generator that can operate lighting, heating (boilers and circulating pumps), magnetic door alarm system, cold holding equipment in the main kitchen and several receptacles for life support equipment such as oxygen, safety equipment such as suction machines and the fire panel.

At the time of the visit, no documentation could be provided that the licensee had an agreement with a generator company that could provide guaranteed access to a generator that can operate the systems noted above. [s. 19(4)]

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 guaranteed access to a generator that can operate the resident-staff communication and response system and elevators within 3 hours of a power outage, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 90. Maintenance services

Specifically failed to comply with the following:

s. 90. (1) As part of the organized program of maintenance services under clause 15 (1) (c) of the Act, every licensee of a long-term care home shall ensure that,
(b) there are schedules and procedures in place for routine, preventive and remedial maintenance. O. Reg. 79/10, s. 90 (1).

Findings/Faits saillants :

A preventive maintenance schedule and procedures were not developed for in home maintenance staff to follow with respect to the monitoring of the elevators in the home.

The home has a contract with an elevator company that routinely inspects both elevators in the home and that also conducts remedial maintenance on elevator components. However, the elevators are not monitored by in home staff to ensure that safety components (door sensors, transition levels, emergency alarm and door alarms and retraction) remain in good working order between inspections.

During the inspection, the passenger elevator doors were tested. The sensors were functional, which signals the elevator to keep the doors open. However, after a short period of time, the elevator doors will begin to close and an alarm will sound. During the test, the alarm sounded and the doors began to close, but did not retract when the inspector stood in their way. The doors continued to try and close, applying a fair amount of pressure. Elevator passengers who are not able to move away from the doors when they are closing may become injured. [s. 90(1)(b)]

WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 230. Emergency plans

Specifically failed to comply with the following:

s. 230. (4) The licensee shall ensure that the emergency plans provide for the following:
1. Dealing with,
 i. fires,
 ii. community disasters,
 iii. violent outbursts,
 iv. bomb threats,
 v. medical emergencies,
 vi. chemical spills,
 vii. situations involving a missing resident, and
 viii. loss of one or more essential services. O. Reg. 79/10, s. 230 (4).

s. 230. (5) The licensee shall ensure that the emergency plans address the following components:
1. Plan activation. O. Reg. 79/10, s. 230 (5).
2. Lines of authority. O. Reg. 79/10, s. 230 (5).
3. Communications plan. O. Reg. 79/10, s. 230 (5).
4. Specific staff roles and responsibilities. O. Reg. 79/10, s. 230 (5).

Findings/Faits saillants :

1. The licensee did not have emergency plans dealing with the loss of elevator service, which is an essential service. The licensee provided a written policy titled "Loss of Power" with a date of July 1987 on the policy. The policy did not identify that during a power outage, elevators would not be functional and did not provide details for staff to follow in such an event. The home has a passenger and a service elevator which services several floors and are used by staff to transport residents, equipment and supplies. Many of the residents would not be able to use the stairs should the elevator fail and the home has not identified how they would manage resident transport or the transport of foods, supplies and equipment from floor to floor. [s. 230 (4)1]

2. The emergency plan, specifically the plan related to a loss of power, identifies when it needs to be activated, but the plan does not address the following;

2. Lines of authority.
3. Communications plan.
4. Specific staff roles and responsibilities. [s.230(5)]

Issued on this 30th day of September, 2013

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

B. Sosnik