

**Inspection Report under  
the Long-Term Care  
Homes Act, 2007****Rapport d'inspection en vertu de  
la Loi de 2007 sur les foyers de  
soins de longue durée****Long-Term Care Operations Division  
Long-Term Care Inspections Branch****Division des opérations relatives aux  
soins de longue durée  
Inspection de soins de longue durée**Sudbury Service Area Office  
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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Jun 25, 2020	2020_829757_0012	005302-20, 005326-20	Critical Incident System

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**Licensee/Titulaire de permis**Nipigon District Memorial Hospital  
125 Hogan Road NIPIGON ON P0T 2J0**Long-Term Care Home/Foyer de soins de longue durée**Nipigon District Memorial Hospital  
125 Hogan Road P.O. Box 37 NIPIGON ON P0T 2J0**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs**

DAVID SCHAEFER (757)

**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): June 15-17, 2020.**

**The following intakes were inspected during this Critical Incident System inspection:**

- An intake related to an incident which resulted in a resident experiencing respiratory distress.**
- An intake related to a hazardous substance which was left in a resident's room.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Lead Long-Term Care Registered Practical Nurse (RPN), Housekeeping Lead, Registered Nurses (RNs), RPNs, and a Housekeeper.**

**The Inspector also conducted a daily tour of resident care areas, observed the provision of care and services to residents, and reviewed resident records as well as specific licensee policies, procedures, and programs.**

**The following Inspection Protocols were used during this inspection:**

**Minimizing of Restraining  
Personal Support Services  
Safe and Secure Home**

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

**2 WN(s)**

**2 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**

**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>Légende</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 LTCHA, 2007 S.O. 2007, c.8, s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents. 2007, c. 8, s. 5.**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that the home was a safe and secure environment for its residents.

The home's policy "Safeguards for Residents - LTC 5-02", dated September 2019, stated that all staff were to safeguard the residents' environment by ensuring to "keep all hazardous products locked up on all care areas".

The home's policy "Safe and Secure Home - LTC 5-01", dated September 2019, stated that in order to ensure the home was safe and secure for its residents, "all doors leading to non-residential areas must be equipped with locks (i.e. utility rooms, shower/tub rooms) and locked when not in use".

The following observations were conducted by Inspector #757:

- June 15, 2020: The home's staff room was found to be unlocked and three hazardous substances, identified in WN #2, had been left accessible to residents;
- June 15, 2020: Whirlpool room #1 was found to be unlocked and a hazardous substance, identified in WN #2, had been left accessible to residents;
- June 15, 2020: Both of the home's soiled utility rooms were found unlocked; each room contained two pairs of sharp scissors which were accessible to residents;
- June 16, 2020: Both of the home's soiled utility rooms were found unlocked; and
- June 17, 2020: A diabetic cart containing an unsecured sharps container and lancets was found unattended and accessible to residents beside the nursing station.

During an interview conducted with Registered Practical Nurse (RPN) #105, they indicated that the staff room was normally unlocked. They further indicated that the utility rooms and whirlpool rooms should have been locked when not in use.

During an interview with the Director of Care (DOC), they stated that the home's doors to non-residential areas were required to be locked when not in use, adding that hazardous products could be located in those rooms. The DOC indicated that having hazardous substances and sharps accessible to residents was unsafe and had potential to cause harm to residents. [s. 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 home is a safe and secure environment for its residents, to be implemented voluntarily.***

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**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 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. O. Reg. 79/10, s. 91.**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that all hazardous substances at the home were kept inaccessible to residents at all times.

The home's policy "Safeguards for Residents - LTC 5-02", dated September 2019, stated that all staff were to safeguard the residents' environment by ensuring they kept "all hazardous products locked up on all care areas".

a) A Critical Incident System (CIS) report was submitted to the Director related to an incident where resident #002 was discovered beside a chemical cleaning substance that had been left accessible to the resident in their room.

During an interview with Housekeeper #106, they stated that they were the staff member who had left the cleaning product in resident #002's room. The Housekeeper indicated that they had been rushed to clean the resident's room, and that following cleaning they would usually conduct a check of the room to ensure no substances had been left, including a double-check with a second staff member. They stated that due to the rush, this did not happen, and the substance was left in the room.

During an interview with the home's Housekeeping Lead, they indicated that the substance that had been left in resident #002's room was a hydrogen peroxide cleaning substance.

b) During an observation conducted by the Inspector in the home's staff room on June 15, 2020, it was noted that the room was unlocked, and the following hazardous substances had been left accessible to residents:

- WD-40 — the label read "contents harmful", "do not swallow", and "if swallowed, call a poison control centre or doctor immediately", and included WHMIS symbols indicating a flammable, explosive, and poisonous substance;
- Zochlor disinfectant — the label read "oxidizing material causing immediate and serious toxic effects", and included WHMIS symbols indicating a poisonous and toxic substance; and
- Nonacid cream cleanser and polish — the label read "eye and skin irritant", "harmful if swallowed", and "avoid contact with eyes and skin", and included a WHMIS symbol indicating a toxic substance.

During an interview with RPN #105, they stated that the substance Zochlor was "like bleach, would not want a resident to swallow that".

A subsequent observation was conducted on June 15, 2020, where the inspector noted that whirlpool room #1 was unlocked, and a substance labelled "Disinfectant Cleaner IV" was accessible to residents in the room. The substance had a label which read "Harmful if swallowed" and "Danger—corrosive to eyes. Do not get in eyes, on skin, or on clothing", and included WHMIS symbols indicating a poisonous and corrosive substance.

The Inspector conducted an interview with the DOC. During the interview, the DOC stated that "hazardous materials or products [were to be] stored either in a locked area or cabinet, and certainly out of reach of the residents". The DOC indicated that the hazardous substance left unattended and accessible to residents in resident #002's room, as well as the hazardous substances that were found to be accessible to residents in the staff and whirlpool rooms were a safety risk for residents. [s. 91.]

***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 all hazardous substances at the home are kept inaccessible to residents at all times, to be implemented voluntarily.***

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**Issued on this 3rd day of July, 2020**

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

**Original report signed by the inspector.**