



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

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

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

Hamilton Service Area Office  
119 King Street West, 11th Floor  
HAMILTON, ON, L8P-4Y7  
Telephone: (905) 546-8294  
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Bureau régional de services de Hamilton  
119, rue King Ouest, 11ième étage  
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Division de la responsabilisation et de la performance du système de santé  
Direction de l'amélioration de la performance et de la conformité

**Public Copy/Copie du public**

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Nov 26, 2013	2013_189120_0084	H-000787- 13	Other

**Licensee/Titulaire de permis**

REVERA LONG TERM CARE INC.  
55 STANDISH COURT, 8TH FLOOR, MISSISSAUGA, ON, L5R-4B2

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

NORTHRIDGE  
496 POSTRIDGE DRIVE, OAKVILLE, ON, L6H-7A2

**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 an Other inspection.

This inspection was conducted on the following date(s): November 21, 2013

During the course of the inspection, the inspector(s) spoke with the Associate Director of Care and a maintenance person regarding locks on bedroom doors.

During the course of the inspection, the inspector(s) toured two specific home areas and observed doors to bedrooms.

The following Inspection Protocols were used during this inspection:

Safe and Secure Home



Findings of Non-Compliance were found during this inspection.

<b>NON-COMPLIANCE / NON - RESPECT DES EXIGENCES</b>	
<b>Legend</b>	<b>Legendé</b>
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. 9. Doors in a home**

**Specifically failed to comply with the following:**

**s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:**

**3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.**

**Findings/Faits saillants :**



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1. The licensee has not ensured that the locks installed on two identified bedroom doors have been designed and maintained so that they are readily releasable from the outside in an emergency.

During the inspection, the two identified rooms were observed to have customized dutch doors (half a door) attached to the door frame in front of the existing bedroom doors. The two doors were made of painted wood and had a lock installed on the bedroom side of the door (between the two doors). The locks were both designed to turn and slide and were located approximately 8 inches from the top of the door. The lock was not visible from the corridor side of the door. The locks were not designed so that they could be released quickly and without manipulation (turning or sliding) by any person including those with dementia and cognitive disabilities. Residents who reside in the rooms with the locks on these doors may not be able to release them when in a panic during an emergency. [s. 9(1)3]

***Additional Required Actions:***

***CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".***

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**WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 305.  
Construction, renovation, etc., of homes  
Specifically failed to comply with the following:**

**s. 305. (3) A licensee may not commence any of the following work without first receiving the approval of the Director:**

- 1. Alterations, additions or renovations to the home. O. Reg. 79/10, s. 305 (3).**
- 2. Other work on the home or work on its equipment, if doing the work may significantly disturb or significantly inconvenience residents. O. Reg. 79/10, s. 305 (3).**

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**Findings/Faits saillants :**



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1. The licensee commenced altering two bedroom door entries without first receiving the approval of the Director.

Dutch doors (half doors), made of painted wood were attached to bedroom door frames in front of existing bedroom doors over 12 months ago. According to management staff of the home, the alteration was deemed necessary to provide two residents with additional privacy from wandering residents. Such an alteration does not maintain or improve upon the functional aspects of the home which are factors in allowing any alterations. [s. 305(3)]

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Issued on this 26th day of November, 2013

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

*B. Susnik*



Ministry of Health and  
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Order(s) of the Inspector  
Pursuant to section 153 and/or  
section 154 of the *Long-Term Care  
Homes Act, 2007*, S.O. 2007, c.8

Ordre(s) de l'inspecteur  
Aux termes de l'article 153 et/ou  
de l'article 154 de la *Loi de 2007 sur les foyers  
de soins de longue durée*, L.O. 2007, chap. 8

Health System Accountability and Performance Division  
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Direction de l'amélioration de la performance et de la conformité

**Public Copy/Copie du public**

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Name of Inspector (ID #) /

Nom de l'inspecteur (No) : BERNADETTE SUSNIK (120)

Inspection No. /

No de l'inspection : 2013\_189120\_0084

Log No. /

Registre no: H-000787-13

Type of Inspection /

Genre d'inspection: Other

Report Date(s) /

Date(s) du Rapport : Nov 26, 2013

Licensee /

Titulaire de permis : REVERA LONG TERM CARE INC.  
55 STANDISH COURT, 8TH FLOOR, MISSISSAUGA,  
ON, L5R-4B2

LTC Home /

Foyer de SLD : NORTHRIDGE  
496 POSTRIDGE DRIVE, OAKVILLE, ON, L6H-7A2

Name of Administrator /

Nom de l'administratrice

ou de l'administrateur : Robin Mackie Leslie Harris B.L.

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To REVERA LONG TERM CARE INC., you are hereby required to comply with the following order(s) by the date(s) set out below:



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<b>Order # /</b> <b>Ordre no :</b> 001	<b>Order Type /</b> <b>Genre d'ordre :</b> Compliance Orders, s. 153. (1) (a)
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**Pursuant to / Aux termes de :**

O.Reg 79/10, s. 9. (1) 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 other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be,
    - i. kept closed and locked,
    - ii. equipped with a door access control system that is kept on at all times, and
    - iii. equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,
      - A. is connected to the resident-staff communication and response system, or
      - B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.
  - 1.1. All doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, must be equipped with locks to restrict unsupervised access to those areas by residents.
  2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff.
  3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.
  4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans.
- O. Reg. 79/10, s. 9;  
O. Reg. 363/11, s. 1 (1, 2).

**Order / Ordre :**



Ministry of Health and Long-Term Care

Ministère de la Santé et des Soins de longue durée

Order(s) of the Inspector Pursuant to section 153 and/or section 154 of the Long-Term Care Homes Act, 2007, S.O. 2007, c.8

Ordre(s) de l'inspecteur Aux termes de l'article 153 et/ou de l'article 154 de la Loi de 2007 sur les foyers de soins de longue durée, L.O. 2007, chap. 8

The licensee shall remove the locks from the dutch doors located on the door frames ~~XXXXXXXXXXXX~~ by November 27, 2013. of two identified rooms

Any future amendments that the licensee wishes to make to augment resident room doors or the entry to resident rooms shall be submitted to Bernadette.Susnik@ontario.ca.

Grounds / Motifs :

two identified

1. The licensee has not ensured that the locks installed on <sup>A</sup>bedroom doors ~~XXXXXXXXXXXX~~ have been designed and maintained so that they are readily releasable from the outside in an emergency.

During the inspection, the above two identified rooms were observed to have customized dutch doors (half a door) attached to the door frame in front of the existing bedroom doors. The two doors were made of painted wood and had a lock installed on the bedroom side of the door (between the two doors). The locks were both designed to turn and slide and were located approximately 8 inches from the top of the door. The lock was not visible from the corridor side of the door. The locks were not designed so that they could be released quickly and without manipulation (turning or sliding) by any person including those with dementia and cognitive disabilities. Residents who reside in the rooms with the locks on these doors may not be able to release them when in a panic during an emergency.

(120)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le : Nov 27, 2013



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**Order(s) of the Inspector**  
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Homes Act, 2007*, S.O. 2007, c.8

**Ordre(s) de l'inspecteur**  
Aux termes de l'article 153 et/ou  
de l'article 154 de la *Loi de 2007 sur les foyers  
de soins de longue durée*, L.O. 2007, chap. 8

### **REVIEW/APPEAL INFORMATION**

#### TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

- (a) the portions of the order in respect of which the review is requested;
- (b) any submissions that the Licensee wishes the Director to consider; and
- (c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

Director  
c/o Appeals Coordinator  
Performance Improvement and Compliance Branch  
Ministry of Health and Long-Term Care  
1075 Bay Street, 11th Floor  
TORONTO, ON  
M5S-2B1  
Fax: 416-327-7603





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When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board and the Director

Attention Registrar  
151 Bloor Street West  
9th Floor  
Toronto, ON M5S 2T5

Director  
c/o Appeals Coordinator  
Performance Improvement and Compliance  
Branch  
Ministry of Health and Long-Term Care  
1075 Bay Street, 11th Floor  
TORONTO, ON  
M5S-2B1  
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website [www.hsarb.on.ca](http://www.hsarb.on.ca).



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## **RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL**

### PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

La demande de réexamen doit être présentée par écrit et est signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au titulaire de permis.

La demande de réexamen doit contenir ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le titulaire de permis souhaite que le directeur examine;
- c) l'adresse du titulaire de permis aux fins de signification.

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au:

Directeur  
a/s Coordinateur des appels  
Direction de l'amélioration de la performance et de la conformité  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11<sup>e</sup> étage  
Ontario, ON  
M5S-2B1  
Fax: 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.



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**Ordre(s) de l'inspecteur**  
Aux termes de l'article 153 et/ou  
de l'article 154 de la *Loi de 2007 sur les foyers  
de soins de longue durée, L.O. 2007, chap. 8*

En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire  
Commission d'appel et de révision  
des services de santé  
151, rue Bloor Ouest, 9e étage  
Toronto (Ontario) M5S 2T5

Directeur  
a/s Coordinateur des appels  
Direction de l'amélioration de la performance et de la  
conformité  
Ministère de la Santé et des Soins de longue durée  
1075, rue Bay, 11e étage  
Ontario, ON  
M5S-2B1  
Fax: 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au [www.hsarb.on.ca](http://www.hsarb.on.ca).

**Issued on this 26th day of November, 2013**

**Signature of Inspector /  
Signature de l'inspecteur :**

**Name of Inspector /**

**Nom de l'inspecteur :** BERNADETTE SUSNIK

**Service Area Office /**

**Bureau régional de services :** Hamilton Service Area Office