



**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**

**Division de la responsabilisation et de la
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Direction de l'amélioration de la
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Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Dec 19, 2014	2014_189120_0081	H-000773-14	Follow up

Licensee/Titulaire de permis

PARK LANE TERRACE LIMITED
284 CENTRAL AVENUE LONDON ON N6B 2C8

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

PARK LANE TERRACE
295 GRAND RIVER STREET NORTH PARIS ON N3L 2N9

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 Follow up inspection.

This inspection was conducted on the following date(s): December 16 & 17, 2014

An inspection (2014-267528-0017) was previously conducted April 14-24, 2014 at which time Order #001 was issued related to general sanitation of dishes and bathing equipment. For this visit, the conditions laid out in the Order were met. During this inspection, additional non-compliance was identified related to sanitation, see below for details.

During the course of the inspection, the inspector(s) spoke with the Administrator and non-registered staff

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

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)

The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
LTCHA, 2007 S.O. 2007, c.8 s. 15. (2)	CO #001	2014_267528_0017		120



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. 87. Housekeeping



Specifically failed to comply with the following:

s. 87. (2) As part of the organized program of housekeeping under clause 15 (1) (a) of the Act, the licensee shall ensure that procedures are developed and implemented for,

(a) cleaning of the home, including,

(i) resident bedrooms, including floors, carpets, furnishings, privacy curtains, contact surfaces and wall surfaces, and

(ii) common areas and staff areas, including floors, carpets, furnishings, contact surfaces and wall surfaces; O. Reg. 79/10, s. 87 (2).

s. 87. (2) As part of the organized program of housekeeping under clause 15 (1) (a) of the Act, the licensee shall ensure that procedures are developed and implemented for,

(b) cleaning and disinfection of the following in accordance with manufacturer's specifications and using, at a minimum, a low level disinfectant in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices:

(i) resident care equipment, such as whirlpools, tubs, shower chairs and lift chairs,

(ii) supplies and devices, including personal assistance services devices, assistive aids and positioning aids, and

(iii) contact surfaces; O. Reg. 79/10, s. 87 (2).

Findings/Faits saillants :

1. The licensee did not ensure that procedures were either developed and/or implemented for cleaning of equipment, walls, floors and carpets in the home.

A) On December 16, 2014, heavy amounts of hard water scale was observed on the surface of 6 out of 7 tubs, most soiled utility room hoppers, soiled utility room floors and tiled walls, the Heritage South shower area (floor and wall), aerators on washroom faucets located in serveries, staff, public & common resident washrooms. The housekeeping manual did not include any information regarding the removal of hard water scale and iron from tiled walls, floors, fixtures and equipment. The Administrator was not able to confirm if nursing procedures included de-scaling routines or the use of specialized products for hard scale removal from bathing equipment or if dietary procedures included procedures for descaling serveries and kitchen fixtures and

equipment.

B) The carpet was observed to be heavily stained pink and yellow in the Twin Rivers home area, near the nurse's station and in a common lounge in Twin Rivers. According to the home's procedure for carpet care, carpets were to be deep cleaned weekly. The carpet cleaning schedule revealed that the carpets in Twin Rivers were cleaned October 2, November 27 and December 11, 2014, or on average of once per month. The home's policy for carpet care was not implemented.

C) Heavy amounts of dust was observed on ceiling lift motors and tracks in each tub room on December 16, 2014. The housekeeping policies and procedures did not identify the cleaning requirements and frequencies for cleaning lift equipment and accessories. The home's daily cleaning routines specified that tub and shower rooms were to be cleaned daily, but did not include the identified equipment.

D) Dusty exhaust grilles were observed but not limited to the Grand River soiled utility room, Twin River tub room, Grand River tub room, Sunrise Court shower, resident washrooms 108, 109, Grand River & Twin River dining rooms and in the corridor above the cabinets and sink station near the main kitchen. The home's housekeeping or maintenance manuals did not include any direction for staff as to frequency of cleaning, who would clean the grilles and how.

E) Heavy amounts of soap and disinfectant residue was observed over a two day period on the floor next to the head of each tub located in the Grand River Court and Twin Rivers tub rooms. The residue was thick and slippery and according to the housekeeping manual, floors were required to be cleaned daily and according to the home's health and safety policies, spills by any staff member immediately.

F) Baseboards located in the Heritage South and North bedrooms, especially those that were a dark green colour had a white residue on them. The residue could not be verified as related to the hard water scale or to spray buff waxing products. The residue would require a specialized cleaning process which was not identified in the housekeeping manual. [s. 87(2)(a)]

2. The licensee did not ensure that procedures developed for cleaning and disinfecting personal care supplies or articles such as bed pans and wash basins were implemented.

According to the home's procedure (titled "Bedpan/Urinal Cleaning Procedure", dated



Jan. 2011) posted in the home's various soiled utility rooms, urinals, bed pans and wash basins were to be cleaned after each use by washing with soap and water, rinsed and "sanitized" with Virox. In addition, wash basins were to be collected by staff working on night shift and deep cleaned once per week so that they could be de-scaled followed by storing them in "an appropriate place" which was not specified.

Numerous washbasins and several bed pans were observed to be stored inappropriately on towel bars and grab bars in resident ensuite washrooms. Washbasins and/or bed pans were observed to be dusty or had residues on the surface both on December 16 & 17, 2014 in 11 identified rooms. Some of the washrooms had a shelving unit which was installed for the storage of personal supplies and were not being used. Other washrooms did not have a shelving unit. Basins were unlabeled in 4 shared resident washrooms. In particular, a basin in one identified washroom was heavily coated in drywall dust and sitting on a shelf. Confirmation was made that the resident's washroom was sanded and repainted two months prior. The basin had not been cleaned or used in over two months.

According to registered staff, who provided a cleaning schedule for the articles for review, night shift staff were assigned to clean the personal articles once per week or every Wednesday or Tuesday, depending on the home area. Once cleaned, the staff were to initial that they had completed the task. When the schedules were reviewed for Heritage North and South, staff initialed that they had cleaned the basins on December 16, 2014, yet the basins remained visibly soiled on inspection on December 17, 2014. No cleaning schedule was available on the Sunrise Court home area for December. A tour of all of the soiled utility rooms in the home revealed that they had not been used for any cleaning and disinfecting on the night of December 16, 2014. Disinfectant was not available in soiled utility rooms located in Heritage South and Heritage North on either December 16 or 17, 2014. None of the soiled utility rooms were equipped with cleaning brushes or necessary accessories to remove residues from the surfaces while cleaning with soap and water.

The licensee did not ensure that staff were cleaning and "disinfecting" basins and bed pans after each use and deep cleaning them on a weekly basis. As washbasins and bedpans are in contact with bodily fluids, they are required to be "disinfected" as opposed to "sanitized" which was the term used in the home's cleaning policy. [s. 87(2)(b)]



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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 procedures are developed and implemented for cleaning equipment, walls, floors and carpets in the home, to be implemented voluntarily.

Issued on this 19th day of December, 2014

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

Original report signed by the inspector.