



**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 prévue
le Loi de 2007 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
performance du système de santé
Direction de l'amélioration de la
performance et de la conformité**

London Service Area Office
130 Dufferin Avenue 4th floor
LONDON ON N6A 5R2
Telephone: (519) 873-1200
Facsimile: (519) 873-1300

Bureau régional de services de
London
130 avenue Dufferin 4ème étage
LONDON ON N6A 5R2
Téléphone: (519) 873-1200
Télécopieur: (519) 873-1300

Amended Public Copy/Copie modifiée du public de permis

Report Date(s)/ Date(s) du Rapport	Inspection No/ No de l'inspection	Log #/ Registre no	Type of Inspection / Genre d'inspection
Nov 10, 2015;	2015_216144_0037 (A1)	009018-15	Follow up

Licensee/Titulaire de permis

RYKKA CARE CENTRES LP
3200 Dufferin Street Suite 407 TORONTO ON M6A 3B2

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

Berkshire Care Centre
350 DOUGALL AVENUE WINDSOR ON N9A 4P4

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

CAROLEE MILLINER (144) - (A1)

Amended Inspection Summary/Résumé de l'inspection modifié



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The compliance date for order #001 was changed from 2042 to 2015.

Issued on this 10 day of November 2015 (A1)

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

Original report signed by the inspector.



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The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): July 7, 2015

The follow-up inspection was related to resident baths and the infection prevention and control program.

During the course of the inspection, the inspector(s) spoke with two family members, the Administrator, Assistant Director of Care, three Registered Practical Nurses, two Personal Service Workers and one Housekeeping Aide.

During the course of the inspection, the Inspector toured four resident home areas and reviewed twenty resident clinical records.

The following Inspection Protocols were used during this inspection:

Accommodation Services - Housekeeping

Infection Prevention and Control

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

2 WN(s)

0 VPC(s)

2 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 # / NO DE L'INSPECTION	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 31.	WN	2014_255516_0041	144
O.Reg 79/10 s. 33.	CO #001	2015_216144_0019	144
O.Reg 79/10 s. 8.	WN	2014_255516_0041	144
O.Reg 79/10 s. 8.	WN	2015_216144_0019	144



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.) The following constitutes written notification of non-compliance under paragraph 1 of section 152 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. 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. 229. Infection prevention and control program

Specifically failed to comply with the following:

s. 229. (4) The licensee shall ensure that all staff participate in the implementation of the program. O. Reg. 79/10, s. 229 (4).

Findings/Faits saillants :



1. The licensee has failed to ensure that staff participate in the implementation of the infection prevention and control program.

During the follow-up inspection, the following observations were made:

- A) One extended toilet seat and urine collection hat on the floor under the washroom counter in one identified ward room.
- B) One urine collection hat on the floor under the washroom counter in one identified room.
- C) Soiled urinals on both the back of the toilet and washroom counter in another identified resident room.
- D) An extended toilet seat on the floor under the washroom counter in one ward room.
- E) Wet linens and a soiled incontinent product on the washroom floor of an identified room.
- F) One incontinent product on the floor beside a dresser in a resident's room and two urinals on the washroom counter.
- G) A wash basin on the washroom counter in a resident's washroom.
- H) Sixth floor tub room, two wash basins on the floor under the sink and a privacy curtain on the floor in front of the tub
- I) One urinal on the floor under the washroom counter in a resident's room.
- J) Two bed pans on the floor under the washroom counter and one urinal on the back of the toilet in a ward room.

The Administrator, Assistant Director of Care, three Registered Nurses and two Personal Service Workers confirmed that as part of the Infection Prevention and Control Program, resident hygiene items, soiled linens and incontinent products should not be left on the floor and urinals not left on washroom counters and the back of toilets. [s. 229. (4)]

Additional Required Actions:

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



(A1)The following order(s) have been amended:CO# 001

WN #2: 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,
(d) addressing incidents of lingering offensive odours. O. Reg. 79/10, s. 87 (2).

Findings/Faits saillants :

1. The licensee has failed to ensure that procedures are developed and implemented for addressing incidents of lingering offensive odours.

A) During the follow-up inspection, lingering odours were present in four identified the resident rooms.

B) Also during the follow-up inspection, an offensive, lingering odour was present in a fifth resident's room when entered on five occasions by the Inspector between 1000 and 1530 hours.

C) One Registered Practical Nurse and three Personal Service Workers confirmed the odour is ongoing in this particular room and that the floor in the room is often cleaned with Detol, an antibacterial soap without resolve.

D) The Administrator and Acting Director of Care confirmed the frequent presence of the offensive odour and the home's challenge to permanently resolve it. [s. 87. (2) (d)]

Additional Required Actions:

CO # - 002 will be served on the licensee. Refer to the "Order(s) of the Inspector".



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Issued on this 10 day of November 2015 (A1)

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

Original report signed by the inspector.



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Order(s) of the Inspector

Ordre(s) de l'inspecteur

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

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

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Name of Inspector (ID #) /

Nom de l'inspecteur (No) : CAROLEE MILLINER (144) - (A1)

Inspection No. /

No de l'inspection : 2015_216144_0037 (A1)

Appeal/Dir# /

Appel/Dir#:

Log No. /

Registre no. : 009018-15 (A1)

Type of Inspection /

Genre d'inspection: Follow up

Report Date(s) /

Date(s) du Rapport : Nov 10, 2015;(A1)

Licensee /

Titulaire de permis : RYKKA CARE CENTRES LP
3200 Dufferin Street, Suite 407, TORONTO, ON,
M6A-3B2

LTC Home /

Foyer de SLD : Berkshire Care Centre
350 DOUGALL AVENUE, WINDSOR, ON, N9A-4P4



**Ministry of Health and
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Order(s) of the Inspector

Ordre(s) de l'inspecteur

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

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

Name of Administrator / Bidarekere Swamy
Nom de l'administratrice
ou de l'administrateur :

To RYKKA CARE CENTRES LP, you are hereby required to comply with the following order(s) by the date(s) set out below:

Order # / Ordre no : 001	Order Type / Genre d'ordre : Compliance Orders, s. 153. (1) (a)
Linked to Existing Order / Lien vers ordre existant:	2015_216144_0019, CO #002;

Pursuant to / Aux termes de :

O.Reg 79/10, s. 229. (4) The licensee shall ensure that all staff participate in the implementation of the program. O. Reg. 79/10, s. 229 (4).

Order / Ordre :

The licensee must ensure that all staff participate in the implementation of the Infection Prevention and Control Program.



Order(s) of the Inspector

Ordre(s) de l'inspecteur

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

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

Grounds / Motifs :

1. The licensee has failed to ensure that staff participate in the implementation of the infection prevention and control program.

During the follow-up inspection, the following observations were made in various identified resident rooms:

- A) One extended toilet seat and urine collection hat on the floor under the washroom counter.
- B) One urine collection hat on the floor.
- C) Soiled urinals on both the back of the toilet and washroom counter.
- D) An extended toilet seat on the floor under the washroom counter in one ward room.
- E) Wet linens and a soiled incontinent product on the washroom floor.
- F) One incontinent product on the floor beside a dresser and two urinals on the washroom counter.
- G) One wash basin on the washroom counter.
- H) Two wash basins on the floor under the sink and a privacy curtain on the floor in front of the tub in one identified tubroom.
- I) One urinal on the floor under the washroom counter
- J) Two bed pans on the floor under the washroom counter and one urinal on the back of the toilet.

The Administrator, Acting Director of Care, three Registered Nurses and two Personal Service Workers confirmed that as part of the Infection Prevention and Control Program, resident hygiene items, soiled linens and incontinent products should not be left on the floor and urinals not left on washroom counters and the back of toilets.

A compliance order was issued with the April 14, 2015 Resident Quality Inspection (RQI) related to the Infection Prevention and Control Program.
(144)

**This order must be complied with by /
Vous devez vous conformer à cet ordre d'ici le :**



Order(s) of the Inspector

Ordre(s) de l'inspecteur

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

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

Aug 31, 2015(A1)

Order # / **Order Type /**
Ordre no : 002 **Genre d'ordre :** Compliance Orders, s. 153. (1) (a)

Pursuant to / Aux termes de :

O.Reg 79/10, 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;
- (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;
- (c) removal and safe disposal of dry and wet garbage; and
- (d) addressing incidents of lingering offensive odours. O. Reg. 79/10, s. 87 (2).

Order / Ordre :



Order(s) of the Inspector

Ordre(s) de l'inspecteur

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

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 home must ensure that incidents of lingering offensive odours are addressed and resolved.

Grounds / Motifs :

1. The licensee has failed to ensure that procedures are developed and implemented for addressing incidents of lingering offensive odours.

A) During the follow-up inspection, lingering urine odours were present in four identified resident rooms between 1000 and 1200 hours.

B) Also during the follow-up inspection, an offensive lingering odour was present in a fifth resident's room when entered on five occasions by the Inspector between 1000 and 1530 hours.

C) One Registered Practical Nurse, three Personal Service Workers and one Housekeeping Aide confirmed the odour is ongoing in this particular room (item B) and that the floor in the room is often cleaned with Detol, an antibacterial soap without resolve.

D) The Administrator and Acting Director of Care confirmed the frequent presence of the offensive odour and the home's challenge to permanently resolve the concern.

A compliance order was previously issued with the April 14, 2015 Resident Quality Inspection (RQI) related to lingering odours.

(144)

**This order must be complied with by /
Vous devez vous conformer à cet ordre d'ici le :**

Aug 31, 2015



**Ministry of Health and
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2007, c. 8

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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

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



**Ministry of Health and
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Order(s) of the Inspector

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section 154 of the Long-Term
Care Homes Act, 2007, S.O.
2007, c. 8

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

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Ordre(s) de l'inspecteur

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O. 2007, chap. 8

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.

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, 11e étage
Toronto ON M5S 2B1
Télécopieur : 416-327-7603



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2007, c. 8

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foyers de soins de longue durée, L.
O. 2007, chap. 8

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.

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
Toronto ON M5S 2B1
Télécopieur : 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.

Issued on this 10 day of November 2015 (A1)

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

**Name of Inspector /
Nom de l'inspecteur :**

CAROLEE MILLINER

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

London