

Health System Accountability and Performance Division Performance Improvement and Compliance Branch

# Ministère de la Santé et des Soins de longue durée

Division de la responsabilisation et de la performance du système de santé

Direction de l'amélioration de la performance et de la conformité

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

Hamilton Service Area Office

Hamilton, ON L8P 4Y7

Telephone: 905-546-8294

Facsimilie: 905-546-8255

119 King Street West, 11th Floor

## Rapport d'inspection prevue le *Loi de 2007 les foyers de soins de longue durée*

Bureau régional de services de Hamilton 119, rue King Quest, 11iém étage Hamilton, ON L8P 4Y7

Téléphone: 905-546-8294 Télécopieur: 905-546-8255

	Licensee Copy/Copie du Titula	ire 🛛 Public Copy/Copie Public		
Date of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection		
08 and 09 February 2011	2011_127_1856_07Feb133154	Follow Up # S-00972		
Licensee/Titulaire		· · · · · · · · · · · · · · · · · · ·		
Wikwemikong Nursing Home Limited, 2281 Wikwemikong Way, P.O. Box 114, Wikwemikong ON P0P 2J0				
Long-Term Care Home/Foyer de soins	de longue durée			
Wikwemikong Nursing Home, 2281 Wikwemikong Way, P.O. Box 114, Wikwemikong ON P0P 2J0				
Name of Inspector(s)/Nom de l'inspect				
Richard Hayden, Long Term Care Homes Inspector – Environmental Health #127				
inspect	tion Summary / Sommaire d'In	spection		
The purpose of this inspection was to	conduct a follow-up inspection.			
During the course of the inspection, the inspector spoke with the administrator/director of care, registered and non-registered nursing staff, administrative staff, maintenance person, activation assistant, dietary staff, housekeeping staff, residents and residents' family members.				
During the course of the inspection, the inspector reviewed the infection control manual, nursing manual, staffing schedules and maintenance-related documentation; and inspected previously identified areas of non-compliance.				
The following Inspection Protocols we	ere used during this inspection:			
Accommodation Services – He				
Accommodation Services – La	•			
<ul> <li>Accommodation Services – M</li> <li>Infection Prevention &amp; Control</li> </ul>				
Safe and Secure Home				
Sufficient Staffing				
Findings of Non-Compliance were found during this inspection. The following action was taken:				
3 WN				
3 VPC				
Corrected Non-Compliance is listed in the section titled Corrected Non-Compliance.				



Ministère de la Santé et des Soins de longue durée Inspection Report under the *Long-Term Care Homes Act, 2007*  Rapport d'inspection prevue le *Loi de 2007 les foyers de soins de longue durée* 

NON-COMPLIANCE / Non-respectés				
Definitions/Définitions				
WN – Written Notifications/Avis écrit VPC – Voluntary Plan of Correction/Plan de redressement volontaire				
DR – Director Referral/Régisseur envoye         CO – Compliance Order/Ordres de conformité         WAO – Work and Activity Order/Ordres: travaux et activitiés				
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	Le suivant constituer un avis d'ecrit de l'exigences prevue le paragraph 1 de section 152 de les foyers de soins de longue dureé.			
Non-compliance with requirements under the <i>Long-Term Care Homes</i> 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.)	Non-respect avec les exigences sur le <i>Loi de 2007 les foyers de soins de longue dureé</i> à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prevue par la présente loi" au paragraphe 2(1) de la loi.			

**WN #1:** The Licensee has failed to comply with 15(1)(c): Every licensee of a long-term care home shall ensure that, there is an organized program of maintenance services for the home.

### Findings:

During the inspection of 08 and 09 February 2011, the inspector determined that neither the administrator/director of care nor the maintenance person could locate maintenance-specific policies and procedures or information related to the maintenance program or auditing. There were no demonstrable schedules or procedures in place for routine, preventive and remedial maintenance. There was no qualified designated lead for the maintenance program.

### **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, to be implemented voluntarily, for achieving compliance related to ensuring there is an organized program of maintenance services for the home.

WN #2: The Licensee has failed to comply with O. Reg. 79/10, s. 90 (1) and (2):
(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, maintenance services in the home are available seven days per week to ensure that
<ul> <li>(a) the building, including both interior and exterior areas, and its operational systems are maintained in good repair; and</li> </ul>
(b) there are schedules and procedures in place for routine, preventive and remedial maintenance.
<ul> <li>(2) The licensee shall ensure that procedures are developed and implemented to ensure that,</li> <li>(a) electrical and non-electrical equipment, including mechanical lifts, are kept in good repair, and maintained and cleaned at a level that meets manufacturer specifications, at a minimum;</li> <li>(b) all equipment, devices, assistive aids and positioning aids in the home are kept in good repair.</li> </ul>

(b) all equipment, devices, assistive aids and positioning aids in the home are kept in good repair, excluding the residents' personal aids or equipment;



Ministère de la Santé et des Soins de longue durée Inspection Report under the *Long-Term Care Homes Act, 2007*  Rapport d'inspection prevue le *Loi de 2007 les foyers de soins de longue durée* 

0

- (c) heating, ventilation and air conditioning systems are cleaned and in good state of repair and inspected at least every six months by a certified individual, and that documentation is kept of the inspection;
- (d) all plumbing fixtures, toilets, sinks, grab bars and washroom fixtures and accessories are maintained and kept free of corrosion and cracks;
- (e) gas or electric fireplaces and heat generating equipment other than the heating system referred to in clause (c) are inspected by a qualified individual at least annually, and that documentation is kept of the inspection;
- (f) The licensee shall ensure that procedures are developed and implemented to ensure that, hot water boilers and hot water holding tanks are serviced at least annually, and that documentation is kept of the service;
- (g) the temperature of the water serving all bathtubs, showers, and hand basins used by residents does not exceed 49 degrees Celsius, and is controlled by a device, inaccessible to residents, that regulates the temperature;
- (h) immediate action is taken to reduce the water temperature in the event that it exceeds 49 degrees Celsius;
- (i) the temperature of the hot water serving all bathtubs and showers used by residents is maintained at a temperature of at least 40 degrees Celsius;
- (j) if the home is using a computerized system to monitor the water temperature, the system is checked daily to ensure that it is in good working order; and
- (k) if the home is not using a computerized system to monitor the water temperature, the water temperature is monitored once per shift in random locations where residents have access to hot water.

### Findings:

During the inspection of 08 and 09 February 2011, the inspector determined that neither the administrator/director of care nor the maintenance person could locate maintenance-specific policies and procedures or information related to the maintenance program or auditing. There were no demonstrable schedules or procedures in place for routine, preventive and remedial maintenance. There were no procedures developed and implemented specifically for items listed in O. Reg. 79/10, s. 90(2). The maintenance person works five days per week, Monday to Friday, and is not on-call for after hours or weekend maintenance-related emergencies.

### 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, to be implemented voluntarily, for achieving compliance related to ensuring:

1. there are schedules and procedures in place for routine, preventive and remedial maintenance; and

2. procedures are developed and implemented for the items listed in O. Reg. 79/10, s. 90(2).



Ministère de la Santé et des Soins de longue durée Inspection Report under the Long-Term Care Homes Act, 2007 Rapport d'inspection prevue le Loi de 2007 les foyers de soins de longue durée

WN #3: The Licensee has failed to comply with O. Reg. 79/10, s. 92 (1) and (2):

(1) The licensee shall ensure that there is a designated lead for each of the housekeeping, laundry services

- and maintenance services programs, but the same person may be the designated lead for more than one
- program.

(2) The designated lead must have,

- (a) a post-secondary degree or diploma;
- (b) knowledge of evidence-based practices and, if there are none, prevailing practices relating to housekeeping, laundry and maintenance, as applicable; and
- (c) a minimum of two years experience in a managerial or supervisory capacity.

### Findings:

Page 4 of 5

The home did not have a qualified designated lead for the housekeeping, laundry services or maintenance services programs since September 2010. During the inspection of 08 and 09 February 2011, the inspector spoke with the administrator/director of care who advised there was no qualified designated lead for the housekeeping, laundry services or maintenance services programs in the home. The administrator/DOC indicated the maintenance supervisor resigned in September 2010. Since that time, a former maintenance worker was acting in the position but did not have the required qualifications as stipulated in section 92 of O. Reg. 79/10. That person resigned in January 2011.

### **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, to be implemented voluntarily, for achieving compliance related to ensuring there is qualified designated lead for the housekeeping, laundry services and maintenance services programs.



Ministère de la Santé et des Soins de longue durée

Inspection Report under the *Long-Term Care Homes Act, 2007*  Rapport d'inspection prevue le *Loi de 2007 les foyers de soins de longue durée* 

REQUIREMENT EXIGENCE	Type of Action/Order	Action/ Order #	INSPECTION REPORT #	INSPECTOR ID #
LTCHA, 2007, c.8., <b>s. 8 (3)</b>	Order	CO #001	Critical Incident Inspection 08 November 2010	127
O. Reg. 79/10, <b>s. 17(1)(a)</b>	Order	CO #002	Critical Incident Inspection – 08 November 2010	127
O. Reg. 79/10, <b>s. 87 (2)</b>	WN	WN #3	Critical Incident Inspection – 08 November 2010	127
O. Reg. 832, R.R.O. 1990, <b>s. 5 (2)</b>	Area of Non- Compliance		Enforcement Inspection – 09 June 2010 – and all previous inspection dates	127
O. Reg. 832, R.R.O. 1990, <b>s. 59 (1)1.1</b>	Area of Non- Compliance		Enforcement Inspection – 09 June 2010 – and all previous inspection dates	127
O. Reg. 832, R.R.O. 1990, <b>s. 21 (1)</b>	Area of Non- Compliance		Enforcement Inspection – 09 June 2010 – and all previous inspection dates	127

Signature of Licensee of Signature du Titulaire d	or Representative of Licensee lu représentant désigné	Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.
		L'ATS
Title:	Date:	Date of Report (if different from date(s) of inspection).
		22 March 2011