Ontario

Ministry of Health and Long-Term Care

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

Ministére de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch
Division de la responsabilisation et de la performance du système de santé
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Feb 12, +13, 2012	2012_072120_0018	Critical Incident

Licensee/Titulaire de permis

THE REGIONAL MUNICIPALITY OF PEEL
10 PEEL CENTRE DRIVE, BRAMPTON, ON, L6T-4B9

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

TALL PINES LONG TERM CARE CENTRE
1001 Peter Robertson Blvd., BRAMPTON, ON, L6R-2Y3

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 Critical Incident inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, Environmental Services Supervisor, acting Director of Care, Nursing Supervisor, resident and resident's family and non-registered staff regarding an incident related to an injury. (H-000316-12)

During the course of the inspection, the inspector(s) reviewed lift equipment service reports and visually observed slings and lifts.

The following Inspection Protocols were used during this inspection:

Accommodation Services - Maintenance

Personal Support Services

Findings of Non-Compliance were found during this inspection.

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. 36. Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents. O. Reg. 79/10, s. 36.

Findings/Faits saillants :

In 2011, staff did not use safe transferring techniques when they assisted an identified resident using a MediLifter mechanical lift. The resident's plan of care specifies that "proper equipment" be used for all transfers and that 2 persons are required to assist them. Only one of 2 staff members involved in the transfer had received lift and transfer re-training within the last 2 years. During the transfer, the resident sustained an injury to their leg as they were being lowered back into their wheelchair using the MediLifter. According to the Supervisor of Care and one of the staff members interviewed, one staff member was required to remain behind the resident to guide their upper body into position and the other was to control the lift and manage the lower body. As the resident cannot independently move their lower extremities, staff are required to maneuver their legs. The second staff member failed to guide the resident's legs past the metal protrusions on the wheelchair, causing the leg to rub against it and tearing the skin. This staff member has not received lift and transfer re-training in the last 2 years. The incident was investigated by the Supervisor of Care who indicated that both staff were reminded about the proper use of lifts and scheduled them to attend a lift re-training session in 2012.

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 staff use safe transferring and positioning techniques when assisting residents, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 90. Maintenance services

Specifically failed to comply with the following subsections:

s. 90. (2) The licensee shall ensure that procedures are developed and implemented to ensure that,
(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;
(b) all equipment, devices, assistive aids and positioning aids in the home are kept in good repair, excluding the residents' personal aids or equipment;
(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) 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. O. Reg. 79/10, s. 90 (2).

Findings/Faits saillants :

[O. Reg. 79/10, s.90(2)(b)] The licensee has not ensured that procedures are developed and implemented to ensure that equipment in the home is kept in good repair. Slings used to position residents while using mechanical lift equipment are not inspected as per manufacturer's instructions to ensure they remain in good repair. Two slings, one for a Sara 3000 sit to stand lift and one from a resident's room were removed from circulation during the inspection due to ripped stitching. The sling from the Sara 3000 had a tag on it dated Nov. 2010 to indicate it had been inspected by their supplier Arjo. The resident's sling had an Arjo inspection tag on it from April 27, 2011. Manufacturer's instructions for the slings require that staff visually inspect the slings prior to each use and formally each month. The Arjo contractor formally inspects the slings on a yearly basis. No policies or procedures have been developed for the management of the slings and to ensure that each sling is in good condition.

Issued on this 15 th day of March, 2012

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

B. Susnik