



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

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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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Jun 29, 2012, 2012_072120_0052, Critical Incident

Licensee/Titulaire de permis

THE REGIONAL MUNICIPALITY OF HALTON
1151 BRONTE ROAD, OAKVILLE, ON, L6M-3L1

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

ALLENDALE
185 ONTARIO STREET SOUTH, MILTON, ON, L9T-2M4

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 Administrator, Director of Care and Environmental Manager regarding lift equipment.

During the course of the inspection, the inspector(s) viewed lifts and slings on 4 home areas, reviewed employee education attendance records, lift and sling inspection procedures, lift service reports, lift and sling equipment check lists and signature logs, lift inventory lists and lift and sling equipment manuals (H-001158-12)

The following Inspection Protocols were used during this inspection:

Accommodation Services - Maintenance

Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>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.)</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 23. Every licensee of a long-term care home shall ensure that staff use all equipment, supplies, devices, assistive aids and positioning aids in the home in accordance with manufacturers' instructions. O. Reg. 79/10, s. 23.

Findings/Faits saillants :

The licensee of the long term care home has not ensured that staff use all equipment in the home in accordance with manufacturers' instructions.

In 2012, a resident became suspended in a ceiling lift sling while being transferred. The ceiling lift battery had died and staff did not know how to use the manual emergency release strap on the device to lower the resident back down. The staff also failed to check the battery indicators to determine if the battery was adequately charged and if the battery was able to hold a charge. The manufacturer's manual, which was not made available to staff, clearly describes how to use the emergency lowering strap and how to check the battery when under a full load to determine battery power levels.

Interviews held with the Environmental Manager, Administrator and Director of Care confirmed that staff have not received training with respect to the emergency manual release mechanism on the lifts. The last full in-service was provided in 2008 by the home's educator who did not include battery checks or the use of the emergency manual release mechanism in the in-service.

The home had all of the ceiling lifts and batteries inspected by a qualified technician representing the manufacturer on August 29, 2011, at which time, the batteries and emergency release lowering strap were inspected and found to be in good working order.

On the same date as the incident, a technician reviewed the ceiling lift and battery and noted that the lift failed because the battery was 4 years old. The batteries, according to a representative of the manufacturer have a life span from between 1-3 years and depend on the frequency of use and weight of the resident.

The home was not able to provide any information as to when the batteries currently in use were put into circulation for all of the ceiling lifts and some of the floor lifts. Some of the floor lift batteries were labeled with a date, one being from 2009 but most were not labeled.

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 all equipment, devices, assistive aids and positioning aids in the home are kept in good repair.

Numerous transfer slings were observed throughout 4 home areas located on the upper floor. Many were stored in resident rooms, washrooms, draped over floor lifts or on a cart along with the ceiling lift motor. Slings were noted to be from 3 different companies and dated between 2002 and 2012 and many did not have a date listed on extremely worn tags. Four slings were noted to be in poor condition with either loose stitching, unraveling or tearing. The home has established a procedure for staff to inspect the slings prior to each use and if the condition of the sling is in poor repair, staff are to remove the sling from service, place an "out of order" tag on it and call maintenance. However, the check list and sign off logs do not specify which slings were inspected and appears to only apply to slings stored on the cart along with the accompanying ceiling lift motor. When these check lists and signature logs were viewed for the slings found to be unsatisfactory, staff signed off that the slings were in good condition. However, as the check list does not specify which sling is being reviewed, it was difficult to determine what was being inspected.

According to the Director of Care and Administrator, the slings have not been inspected by a trained and qualified individual, typically a representative from a sling manufacturer, in the last few years. Over the last few years, staff have not been given any formal training on sling condition by a trained and qualified person. Slings deteriorate over time and require replacement according to the specific manufacturer's guidelines. In some cases, slings that appear in good condition, may not pass an inspection conducted by a specialist. Procedures that have been developed by the home with respect to sling condition are not being adhered to by staff and the procedures are incomplete with respect to the requirements of each individual sling manufacturer.



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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 to ensure that all equipment, devices, assistive aids and positioning aids in the home are kept in good repair, to be implemented voluntarily.

Issued on this 19th day of July, 2012

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

B. Susmit