

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

Hamilton Service Area Office
119 King Street West, 11th Floor
Hamilton ON L8P 4Y7

Bureau régional de services de Hamilton
119, rue King Ouest, 11^{ième} étage
Hamilton ON L8P 4Y7

**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

Telephone: 905-546-8294
Facsimile: 905-546-8255

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

 Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
October 29, 2010	2010-120-9616-29OCT163606	H-02500 Follow-up to December 18, 2009

Licensee/Titulaire

The Regional Municipality of Peel, 10 Peel Centre Drive, Suite B, 4th Fl., Brampton, ON L6T 0E5

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(s)

Bernadette Susnik, LTC Homes Inspector – Environmental Health #120

Inspection Summary/Sommaire d'inspection

The purpose of this visit was to conduct a follow-up inspection to previously issued non-compliance made under the Ministry of Health and Long-Term Care Homes Program Standards Manual with respect to the following unmet criterion:

- M3.26 (Infection Prevention and Control)

During the course of the inspection, the inspector spoke with the Director of Care, Environmental Services Supervisor, staff educator/infection control designate, housekeeping and nursing staff.

During the course of the inspection, the inspector conducted a walk-through of the building, including resident rooms, washrooms, soiled utility rooms and bathing rooms, observed the housekeepers cleaning routine and inspected the plastic ware used by residents for personal hygiene, inspected all of the soiled utility rooms and bathing rooms.

The following Inspection Protocol was used: *Infection Prevention and Control*

 Findings of Non-Compliance were found during this inspection. The following action was taken:

1 WN
1 VPC

NON- COMPLIANCE / (Non-respectés)
Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN #1: The licensee has failed to comply with O. Reg. 79/10, s. 229(4). The licensee shall ensure that all staff participate in the implementation of the program.

Previously issued as Unmet Criterion M3.26 under the MOHLTC Homes Program Standards Manual.

Findings:

1. Staff members are not participating in the infection prevention and control program, which includes the prevention or the elimination of the spread of disease through hand-hygiene and cleaning and disinfection principles. The following observations were noted;
 - Housekeeping staff are not adhering to the home's policies and procedures with respect to glove use. The same pair of gloves were being worn for multiple duties, when the policy requires the housekeeper to wear gloves for "single tasks" and when they are likely to be exposed to bodily fluids. Housekeepers wore the same pair of gloves for various duties and tasks such as mopping, dusting and surface cleaning.
 - A personal service worker was observed to be wearing gloves while carrying a bag containing soiled linen from the resident's room to the service corridor. The worker is required to remove the gloves after direct care has been completed and then to perform hand hygiene.
2. The shower rooms located in Woodhill and Winfield both had plastic bottles containing ingredients such as body wash and creams with worn labels that could not be read. An ARJO shampoo bottle contained body cream. These are both indicators of re-filling which is not hygienic.
3. The disinfectant dispensing units in the Mayfield, Pinerose, Humber and Winfield shower rooms did not have any disinfectant in them for staff use on the shower cabins on October 29, 2010. Several personal service workers who are required by the home's policy to use the dispensing units, did not have a key in which to replace the bottle of disinfectant. One staff member expressed that they use the disinfectant and poured it on the surface of the cabin, undiluted. The product specifically is required to be diluted as per the manufacturer's requirements. The other 3 shower rooms did not have any available disinfectant products for staff to use.

Additional Required Action:

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 with s. 229(4) in respect to ensuring that all staff participate in the implementation of the program, to be implemented voluntarily.



Signature of Licensee or Representative of Licensee Signature du Titulaire du 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. <i>B. Susnik</i>
Title:	Date:	Date of Report: (if different from date(s) of inspection). <i>Feb. 4/11</i>