



**Ministry of Health and  
Long-Term Care**

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

**Ministère de la Santé et des  
Soins de longue durée**

**Rapport d'inspection sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**

**Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée**

Sudbury Service Area Office  
159 Cedar Street Suite 403  
SUDBURY ON P3E 6A5  
Telephone: (705) 564-3130  
Facsimile: (705) 564-3133

Bureau régional de services de  
Sudbury  
159 rue Cedar Bureau 403  
SUDBURY ON P3E 6A5  
Téléphone: (705) 564-3130  
Télécopieur: (705) 564-3133

**Public Copy/Copie du public**

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<b>Report Date(s) / Date(s) du rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Feb 17, 2017	2017_565612_0003	032869-16, 000256-17	Complaint

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**Licensee/Titulaire de permis**

EXTENDICARE (CANADA) INC.  
3000 STEELES AVENUE EAST SUITE 700 MARKHAM ON L3R 9W2

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

EXTENDICARE YORK  
333 YORK STREET SUDBURY ON P3E 5J3

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

SARAH CHARETTE (612), ALAIN PLANTE (620)

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**Inspection Summary/Résumé de l'inspection**

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**The purpose of this inspection was to conduct a Complaint inspection.**

**This inspection was conducted on the following date(s): January 23-27, 2017.**

**During the course of this inspection the following complaints were inspected:**

- one complaint related to staff bullying residents within the home,**
- one complaint related to resident to resident abuse, and**
- one complaint related to the bathtub/shower room being in a state of disrepair.**

**A Follow Up Inspection #2017\_565612\_0002 and Critical Incident Inspection #2017\_565612\_0004 were conducted concurrently to this inspection.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Assistant Directors of Care (ADOCs), Registered Nurses (RNs), Registered Practical Nurses (RPNs), Personal Support Workers (PSWs), Maintenance Manager, Rehabilitation Assistant, Resident Program Manager, residents and their family members.**

**The Inspector(s) conducted a daily walk through of resident areas, observed resident care areas, observed the provision of care towards residents, observed staff to resident and resident to resident interactions, and reviewed residents' health care records.**

**The following Inspection Protocols were used during this inspection:  
Accommodation Services - Maintenance  
Responsive Behaviours**

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

**1 WN(s)**

**1 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**

**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. 90. Maintenance services**
**Specifically failed to comply with the following:**

**s. 90. (2) The licensee shall ensure that procedures are developed and implemented to ensure that,**  
**(d) all plumbing fixtures, toilets, sinks, grab bars and washroom fixtures and accessories are maintained and kept free of corrosion and cracks; O. Reg. 79/10, s. 90 (2).**

**Findings/Faits saillants :**



1. The licensee has failed to ensure that as part of the organized program of maintenance services under clause 15 (1) (c) of the Act, all plumbing fixtures, toilets, sinks, grab bars and washroom fixtures and accessories were maintained and kept free of corrosion and cracks.

On January 27, 2017, Inspector #620 was approached by resident #040 who stated that they had concerns with the condition of the spa room on a specific unit. The resident stated that they had refused all showers on the unit.

A review of an anonymous complaint received by the Director on January 06, 2017, revealed that a complainant alleged that they had not received a tub bath for months due to the tubs being, "filthy and moldy."

On January 27, 2017, Inspector #620 observed the spa room on a specific unit. The floor of the spa room had an approximate 15 centimeter (cm) area of black colored mold directly below the shower curtain. Approximately 20 cm from the base of the shower there was a seam between the tiling and a plastic bumper pad that was attached at the base of the shower to protect the wall. The caulking in the seam was cracked and there was a five cm ring of mold which ran along the entire perimeter of the seam. The shower curtain had mold along the bottom seam. The shower fixtures were attached to a stainless steel plate which had cracked caulking around its perimeter and the caulking contained black and pink colored mold.

On January 27, 2017, Inspector #620 interviewed PSW #200, who stated that they were aware of the mold in the bathroom and that the mold had always been an issue in the spa room.

On January 27, 2017, Inspector #620 interviewed the Maintenance Manager. Both the Inspector and the Maintenance Manager made an observation of the shower room. They confirmed that there was black colored mold on the shower curtain, on the floor, on the circumference of the wall, and on the panel behind the fixtures. The Maintenance Manager stated that they became aware of the mold concerns in December, 2016. They said that they had a local contractor make a temporary repair. The Maintenance Manager stated that the current condition of the shower was not acceptable and that they would immediately have a staff member repair the cracked caulking and clean the surfaces. They also stated that they would call a local contractor to obtain a more permanent solution for the ongoing mold issue.



A review of email correspondence between the Maintenance Manager and a local contractor revealed that a temporary repair was made on December 14, 2016. A review of other documentation indicated that a more permanent solution was scheduled to take place on February 6, 2017.

On January 27, 2017, Inspector #620 interviewed the ADOC #102 who stated that they first became aware of the mold issue on December 10, 2016. They stated that when they entered the unit on the morning of December 10, 2016, they smelled mold when the elevator doors opened. They also stated that staff immediately approached them to tell them of the strong odor of mold. They stated that the Maintenance Manager became involved and a temporary repair was then made. They also stated that when the mold issue first appeared they ceased use of the shower room until the temporary repair had been completed. They stated that staff should have indicated the reappearance of mold in the unit's maintenance book indicating that mold had developed again in the shower room.

On January 27, 2017, Inspector #620 interviewed the Administrator who confirmed that it was the expectation that any maintenance concerns were to be documented by staff in the maintenance log book so that the concerns could be resolved. They stated that they were unaware of why housekeeping staff or other staff using the spa room had not reported the mold and that they should have done so. [s. 90. (2) (d)]

***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 as part of the organized program of maintenance services under clause 15 (1) (c) of the Act, all plumbing fixtures, toilets, sinks, grab bars and washroom fixtures and accessories are maintained and kept free of corrosion and cracks, to be implemented voluntarily.***



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**Issued on this 22nd day of February, 2017**

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

**Original report signed by the inspector.**