



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

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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
Sep 12, 18, 2012	2012_101322_0002	Other

Licensee/Titulaire de permis

REVERA LONG TERM CARE INC.
55 STANDISH COURT, 8TH FLOOR, MISSISSAUGA, ON, L5R-4B2

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

MACKENZIE PLACE
52 GEORGE STREET, NEWMARKET, ON, L3Y-4V3

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

LORI KANE (322)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct an Other inspection.

During the course of the inspection, the inspector(s) spoke with Director of Care, Environmental Service Supervisor, Activity Director, President of Resident Council, Residents, Registered Staff, PSW Staff, Family members, Dietary and ~~Reva~~ Cooperate Rep.

Revera

During the course of the inspection, the inspector(s) conducted a walk through of the building, observed residents and staff, conducted interviews, observed lunch meal.

The following Inspection Protocols were used during this inspection:

Residents' Council

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.)	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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. 17. Communication and response system
Specifically failed to comply with the following subsections:

s. 17. (1) Every licensee of a long-term care home shall ensure that the home is equipped with a resident-staff communication and response system that,

- (a) can be easily seen, accessed and used by residents, staff and visitors at all times;**
- (b) is on at all times;**
- (c) allows calls to be cancelled only at the point of activation;**
- (d) is available at each bed, toilet, bath and shower location used by residents;**
- (e) is available in every area accessible by residents;**
- (f) clearly indicates when activated where the signal is coming from; and**
- (g) in the case of a system that uses sound to alert staff, is properly calibrated so that the level of sound is audible to staff. O. Reg. 79/10, s. 17 (1).**

Findings/Faits saillants :

1. The licensee failed to ensure that the home is equipped with a resident-staff communication and response system that is available in every area accessible by residents. The two dining rooms and main lounge were not equipped with a resident-staff communication and response system.

2. Discussion with Environmental Service Supervisor, Director of Care, and ^{Revera} ~~Reva~~ Cooperate Representative indicated that a new resident-staff communication and response system is currently being installed and identified rooms will have system.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 129. Safe storage of drugs
Specifically failed to comply with the following subsections:

s. 129. (1) Every licensee of a long-term care home shall ensure that,

- (a) drugs are stored in an area or a medication cart,**
 - (i) that is used exclusively for drugs and drug-related supplies,**
 - (ii) that is secure and locked,**
 - (iii) that protects the drugs from heat, light, humidity or other environmental conditions in order to maintain efficacy, and**
- (iv) that complies with manufacturer's instructions for the storage of the drugs; and**
- (b) controlled substances are stored in a separate, double-locked stationary cupboard in the locked area or stored in a separate locked area within the locked medication cart. O. Reg. 79/10, s. 129 (1).**

Findings/Faits saillants :



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foyers de soins de longue**

1. The licensee failed to ensure that drugs are stored in an area that is secure and locked. Vaccine refrigerator containing vaccines was located in a room that is accessible to residents and had no lock.
Discussed with Director of Care.

Issued on this 18th day of September, 2012

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

A handwritten signature in black ink, appearing to be "J. K.", written in a cursive style within a rectangular box.