



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

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

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

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

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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
October 7, 2010	2010-120-2745-07OCT083442	H-01154 Follow-up to August 11, 2009
Licensee/Titulaire		
Holland Christian Homes, 7900 McLaughlin Road South, Brampton, ON L6Y 5A7		
Long-Term Care Home/Foyer de soins de longue durée		
Faith Manor, 7900 McLaughlin Road South, Brampton, ON L6Y 5A7		
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 related to unmet criteria: • M1.19 (Availability of Equipment) • M3.3 (Safety Systems) • M3.23 (Infection Control Program) During the course of the inspection, the above noted inspector spoke with the Director of Care, Assistant Director of Care and nursing staff. During the course of the inspection, the inspector conducted a walk-through of resident bedrooms, ensuite washrooms, common areas such as lounge rooms, dining rooms and bathing rooms, utility rooms and storage rooms. The following Inspection Protocols were used during this inspection: • <i>Accommodation Services – Maintenance</i> • <i>Accommodation Services – Housekeeping</i> • <i>Infection Prevention and Control</i> • <i>Safe and Secure Home</i> ☒ Findings of Non-Compliance were found during this inspection. The following action was taken: 3 WN 3 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. 87(2)(b). As part of the organized program of housekeeping under clause 15(1)(a) of the Act, the licensee shall ensure that procedures are developed and implemented for,

(b) cleaning and disinfection of resident care equipment, such as whirlpools, tubs, shower chairs, and lift chairs and supplies and devices, including personal assistance services devices, assistive aids, and positioning aids and contact surfaces, using hospital grade disinfectant and in accordance with manufacturer's specifications.

Findings:

1. The policies and procedures that have been developed for staff to follow with respect to cleaning and disinfection of resident care equipment do not require staff to use the ARJO tub disinfectant in the undiluted state on shower and commode chairs. In addition, the staff are not using this hospital grade disinfectant in accordance with manufacturer's specifications. Discussions held with several of the staff revealed that the ARJO product, in the undiluted state, is being poured into spray bottles and then used on equipment. This was verified by finding the product in the undiluted state in spray bottles in four separate shower rooms. The product is very corrosive and poisonous in the undiluted state. The product is required to be diluted as per the label instructions. *(Previously issued as Criterion M3.3 under the Long-Term Care Home Program Standards Manual)*
2. Procedures have been developed but have not been implemented to ensure that resident's wash basins are disinfected after each use. Various basins were found in resident washrooms which had some residue on either the exterior or interior surfaces. *(Previously issued as Criterion M3.23 under the Long-Term Care Home Program Standards Manual)*

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 with s.87(2)(b) in respect to ensuring that cleaning and disinfection of resident care equipment, such as such as whirlpools, tubs, shower chairs, and lift chairs and supplies and devices, including personal assistance services devices, assistive aids, and positioning aids and contact surfaces, using hospital grade disinfectant and in accordance with manufacturer's specifications.

WN #2: The licensee has failed to comply with O. Reg. 79/10, s. 12(1) & 12(2)(b).

12(1) Every licensee of a long-term care home shall ensure that the home has sufficient indoor and outdoor furnishings, including tables, sofas, chairs and lamps, to meet the needs of residents.

12(2) The licensee shall ensure that (b) resident beds are capable of being elevated at the head and have a headboard and a footboard.

Findings:

1. The number of chairs in the home is inadequate to meet the needs of residents. The home does not have a reserve of comfortable chairs to offer a resident should they require one. It was evident that some resident rooms were using chairs taken from lounge spaces. The majority of residents have their own personally owned chairs. Several rooms did not have any chairs. *(Previously issued as Criterion M1.19 under the LTC Homes Program Standards Manual)*
2. One bed was identified in a resident room that did not have a headboard or footboard and was not capable of being elevated at the head.

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 with s. 12(1) & 12(2)(b) in respect to ensuring that a sufficient supply of chairs is always available in the home to meet the needs of residents and that resident beds are capable of being elevated at the head and have a headboard and a footboard, to be implemented voluntarily.

WN #3: The licensee has failed to comply with the LTCHA, 2007, S.O. 2007, c.8, s.15(2)(c). Every licensee of a long-term care home shall ensure that,

(c) the home, furnishings and equipment are maintained in a safe condition and in a good state of repair.

Findings:

1. Numerous wood dining room chairs, in both the first floor and the second floor dining rooms were noted to be deeply worn and rough to the touch. The chairs in this condition are not capable of being cleaned as they are not smooth and water resistant. Various other chairs found in resident rooms, belonging to the home and made of wood, have worn arm rests.
2. A number of night tables in resident rooms were noted to be worn of varnish (oak tables) and others that had been painted a deep brown colour, are heavily scratched.
3. Various chrome-framed chairs in the home are slightly rusted.
4. A cracked container, containing a gel-like substance that is capable of being frozen was noted to be in use on a snack cart on the first floor. This substance, if not adequately frozen and contained, will leak out of the container and contaminate food.

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 with s. 15(2)(c) in respect to ensuring that the home, furnishings and equipment are maintained in a safe condition and in a good state of repair, 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.	
Title:		Date of Report: (if different from date(s) of inspection).	
Date:		<i>B. Susnik</i> <i>December 21/10</i>	