



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

**Rapport d'inspection
prevue 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**

Division de la responsabilisation et de la performance du
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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
September 2, 2010	2010-120-2720-02SEP120228	Complaint - H-01304 & H-01053
Licensee/Titulaire Diversicare Canada Management Services Co., Inc., 2121 Argentinia Rd., Suite 301, Mississauga, ON L5N 2X4		
Long-Term Care Home/Foyer de soins de longue durée Hardy Terrace, 612 Mount Pleasant Rd., RR#2, Brantford, ON N3T 5L5		
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 complaint inspection related to perimeter door access control systems, laundry, housekeeping and maintenance services and critical incident reporting requirements. During the course of the inspection, the inspector spoke with the administrator and the director of care. During the course of the inspection, the inspector reviewed all perimeter door access control systems, walked through the entire home, including various resident bedrooms, communal bathing rooms, lounges, dining areas and reviewed various records, logs and policies kept by the home. The following Inspection Protocols were used during this inspection: Safe and Secure Home Accommodation Services - Laundry Accommodation Services – Housekeeping Accommodation Services – Maintenance ☒ 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/Régleur 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'exigences prévue le paragraph 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.107(3)1.

107(3) The licensee shall ensure that the Director is informed of the following incidents in the home no later than one business day after the occurrence of the incident, followed by the report required under subsection (4):

1. A resident who is missing for less than three hours and who returns to the home with no injury or adverse change in condition.

Findings:

Neither the Registered Nurse or the Practical Registered Nurse who were on duty on the evening of August 24th, 2010, once they became aware of the fact that a resident had left the home unsupervised and without their awareness on August 24, 2010, forwarded the incident to the Administrator or Director of Care for further action. The incident was brought to the attention, for the first time, to the Administrator during the inspection on September 2, 2010. As the Administrator was not aware of the incident, the Director was not informed.

Additional Required Actions:

VPC - pursuant to the *LTC 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.107(3)1 in respect to ensuring that the Director is informed of incidents when resident(s) are missing for less than three hours and who return to the home with no injury or adverse change in condition. The plan is to be implemented voluntarily.

WN #2: The Licensee has failed to comply with: O. Reg. 79/10, s. 87(2)(a)(i)

87(2) 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 (a) cleaning of the home, including,

(i) resident bedrooms, including floors, carpets, furnishings, privacy curtains, contact surfaces and wall surfaces.

Findings:

1. Floor surfaces in many resident rooms and in other areas of the home's E and F wings were noticeably

discoloured and had visible traffic patterns. Procedures and a schedule for wax stripping and resealing was not available for housekeeping staff to follow at the time of the inspection.

2. Some resident rooms were noted to have visibly soiled wall surfaces in the bathrooms as well as in the bedrooms. The home's procedures require housekeeping staff to clean these surfaces daily or as needed.

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)(a)(i) in respect to ensuring that procedures are developed and implemented for cleaning of the home, including resident bedroom floors and wall surfaces. The plan is to be implemented voluntarily.

WN #3 – The Licensee has failed to comply with: LTCHA, 2007, S.O. 2007, c.8, s. 15(2)(c)

15(2) 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. Several resident bedrooms in the E and F wings of the home had flooring surfaces that are not smooth or in a safe condition. The tile was noted to be buckled upwards in some of these rooms potentially causing a tripping hazard.
2. Several toilet seats were not attached adequately to the toilet frame, moving side to side.
3. Window screens were noted to be ill-fitting (either bent or not of the right size), allowing insects to enter the home. Some of the window screens had holes in them. Numerous flies and moths were noted throughout the home.
4. Many doorframes and doors noted to be peeling or scratched of paint, in the B, C and D corridors of the home.
5. Rusty bathroom heaters were located in C5 and D4.
6. A white cabinet located on the wall in the C hall tub room was not impervious to moisture and eroding, making it difficult to clean. The doors on the cabinet were not able to stay closed.

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. The plan is to be implemented voluntarily.

Signature of Licensee of Designated Representative
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:

Date of Report : (if different from date(s) of inspection).

Oct. 25/10