



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
prévus 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
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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
Mar 29, 2012	2012_072120_0028	Other

Licensee/Titulaire de permis

THE REGIONAL MUNICIPALITY OF NIAGARA
2201 ST. DAVID'S ROAD, THOROLD, ON, L2V-4T7

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

NORTHLAND POINTE
2 Fielden Avenue, PORT COLBORNE, ON, L3K-6G4

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

BERNADETTE SUSNIK (120)

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, Assistant Director of Care and the Laundry/housekeeping Supervisor (H-000598-12)

During the course of the inspection, the inspector(s) toured each tub/shower room and dining room, random resident rooms and observed the condition of linens.

This visit was conducted concurrently with inspectors conducting the Resident Quality Inspection. (H-000475-12)

The following Inspection Protocols were used during this inspection:

Accommodation Services - Laundry

Accommodation Services - Maintenance

Infection Prevention and Control

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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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. 89. Laundry service

Specifically failed to comply with the following subsections:

s. 89. (1) As part of the organized program of laundry services under clause 15 (1) (b) of the Act, every licensee of a long-term care home shall ensure that,

- (a) procedures are developed and implemented to ensure that,**
 - (i) residents' linens are changed at least once a week and more often as needed,**
 - (ii) residents' personal items and clothing are labelled in a dignified manner within 48 hours of admission and of acquiring, in the case of new clothing,**
 - (iii) residents' soiled clothes are collected, sorted, cleaned and delivered to the resident, and**
 - (iv) there is a process to report and locate residents' lost clothing and personal items;**
- (b) a sufficient supply of clean linen, face cloths and bath towels are always available in the home for use by residents;**
- (c) linen, face cloths and bath towels are kept clean and sanitary and are maintained in a good state of repair, free from stains and odours; and**
- (d) industrial washers and dryers are used for the washing and drying of all laundry. O. Reg. 79/10, s. 89 (1).**

Findings/Faits saillants :

1. [O. Reg. 79/10, s.89(1)(c)] As part of the organized program of laundry services under clause 15(1)(b) of the Act, the licensee has not ensured that linen, face cloths and bath towels are kept clean and sanitary and maintained in a good state of repair, free from stains and odours.

Five meal aprons, made of terry cloth material, were found to be in poor condition. They were mixed in with another style of meal apron and stacked on a cabinet in several dining rooms. The aprons either had large holes, were threadbare, worn or were frayed. The Laundry/Housekeeping supervisor revealed that the terry cloth aprons have been discontinued and that the home is in the process of removing them from circulation, however no one has been particularly assigned to actively remove them from circulation.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 229. Infection prevention and control program

Specifically failed to comply with the following subsections:

s. 229. (4) The licensee shall ensure that all staff participate in the implementation of the program. O. Reg. 79/10, s. 229 (4).

Findings/Faits saillants :



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1. [O. Reg. 79/10, s.229(4)] The licensee has not ensured that all staff participate in the implementation of the infection prevention and control program.

The infection prevention and control program for the home includes policies and procedures for the cleaning and disinfection of various equipment surfaces and the handling and storage of resident's personal items.

No disinfectant solution could be located in the Bayview Heights tub/shower room for staff to use on the shower chair after use, as required by their policy ICO60805. The shower room was noted to have just been in use from morning care. Other shower rooms all contained the disinfection solution. The Director of Care confirmed that all shower/tub rooms are required to have disinfectant solution conveniently accessible to staff.

Two tubs (Starboard and Bayview Heights home areas) were noted to have a thick soapy residue along the bottom of the tub several hours after use. Two tub lift seats (Harbour Heights and Port Place) were noted to have a yellow residue on the underside. The home's policy #ICO060802 requires staff to clean the underside of the seats and to clean, disinfect and rinse the tub after each use.

Shower chairs located in Starboard, Harbour Heights and Lakeside Gardens were noted to have discoloured padded cushions. When the cushions were lifted from the chairs, the undersides were noted to have a lot of moisture along with black and pink residues. The cushions are not being removed and cleaned properly and then allowed to dry adequately.

Two unlabeled used hairbrushes were found in drawers in the Starboard tub/shower area. Large and small unlabeled nail clippers were found in a container inside of a cabinet in the Starboard tub/shower room and in shower caddies hanging from the shower heads in several shower rooms. Confirmation was made with the Assistant Director of Care that nail clippers are required to be individually labeled and stored inside the labeled wall mounted storage unit and hairbrushes are to be returned to the resident's room.

Fecal stains were left on a commode chair pan in the Bayview Heights tub/shower room. The room was not in use during the inspection. The home's policy ICO060805 requires staff to clean the commode chairs after each use.

Issued on this 2nd day of May, 2012

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

A handwritten signature in cursive script, appearing to read "B. Lussit", written in black ink on a white background.