



**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
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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
Nov 15, 2011	2011_072120_0039	Complaint

Licensee/Titulaire de permis

OAKWOOD RETIREMENT COMMUNITIES INC.
325 Max Becker Drive, Suite 201, KITCHENER, ON, N2E-4H5

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

RIVERSIDE GLEN LONG TERM CARE FACILITY
60 WOODLAWN ROAD EAST, GUELPH, ON, N1H-8M8

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 a Complaint inspection.

During the course of the inspection, the inspector(s) spoke with the general manager, director of nursing care, associate director of care, neighborhood co-ordinator, RAI-MDS co-ordinator, maintenance supervisor, nursing staff and personal support workers regarding resident personal care, supplies and water temperatures. (H-002258-11/H-002194-11)

During the course of the inspection, the inspector(s) toured 3 home areas including resident rooms, utility rooms and supply rooms, tested water temperatures in resident washrooms, tub rooms and shower rooms, reviewed water temperature logs, reviewed resident care documents and observed resident activities.

The following Inspection Protocols were used during this inspection:

Accommodation Services - Housekeeping

Safe and Secure Home

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. 90. Maintenance services

Specifically failed to comply with the following subsections:

- s. 90. (2) The licensee shall ensure that procedures are developed and implemented to ensure that,
- (a) electrical and non-electrical equipment, including mechanical lifts, are kept in good repair, and maintained and cleaned at a level that meets manufacturer specifications, at a minimum;
 - (b) all equipment, devices, assistive aids and positioning aids in the home are kept in good repair, excluding the residents' personal aids or equipment;
 - (c) heating, ventilation and air conditioning systems are cleaned and in good state of repair and inspected at least every six months by a certified individual, and that documentation is kept of the inspection;
 - (d) all plumbing fixtures, toilets, sinks, grab bars and washroom fixtures and accessories are maintained and kept free of corrosion and cracks;
 - (e) gas or electric fireplaces and heat generating equipment other than the heating system referred to in clause (c) are inspected by a qualified individual at least annually, and that documentation is kept of the inspection;
 - (f) hot water boilers and hot water holding tanks are serviced at least annually, and that documentation is kept of the service;
 - (g) the temperature of the water serving all bathtubs, showers, and hand basins used by residents does not exceed 49 degrees Celsius, and is controlled by a device, inaccessible to residents, that regulates the temperature;
 - (h) immediate action is taken to reduce the water temperature in the event that it exceeds 49 degrees Celsius;
 - (i) the temperature of the hot water serving all bathtubs and showers used by residents is maintained at a temperature of at least 40 degrees Celsius;
 - (j) if the home is using a computerized system to monitor the water temperature, the system is checked daily to ensure that it is in good working order; and
 - (k) if the home is not using a computerized system to monitor the water temperature, the water temperature is monitored once per shift in random locations where residents have access to hot water. O. Reg. 79/10, s. 90 (2).

Findings/Faits saillants :

1. [O.Reg.79/10, s.90(2)(g)] The hot water temperature serving the hand basins used by residents exceeded 49 degrees Celsius in the Puslinch home area. Water temperatures spiked to 66.6 C at the hand basins both in the common washroom and in the lounge kitchenette sink. Approximately 15 minutes later, after maintenance staff were notified, the temperatures dropped to below 20C. Another adjustment was made and temperatures returned to the required range between 40-49C.

2. [O.Reg. 79/10, s.90(2)(h)]. Immediate action was not taken to reduce the water temperature in the event that it exceeds 49 degrees Celcius. The hot water temperature log completed by nursing staff and located in the Eramosa home area was reviewed. A water temperature of 121.6F (50C) was recorded on the day shift on November 14th. No follow-up action was recorded. According to the maintenance supervisor, he was not aware that the hot water temperature had exceeded 49C. The water temperature log clearly instructs staff to report exceedances above 120F.

3. [O.Reg.79/10, s.90(2)(i)]. The hot water temperature serving all bathtubs and showers used by residents is not maintained at a temperature of at least 40C. The hot water temperature for the Arjo tub in the Eramosa home area did not exceed 36.7C when run for 3 minutes. The hot water temperatures did not exceed 40C in the 3 shower areas tested. An interview with a resident was held who complained to the Ministry of Health and Long Term Care about receiving cold water during their showers on a number of occasions. Employees who have given showers to residents in the past were questioned and confirmed that the hot water is not very hot and residents have complained that they are cold.

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 hot water temperatures are maintained between 40 and 49C and that immediate follow-up action is taken when hot water exceeds 49C in resident accessible areas., to be implemented voluntarily.

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

Specifically failed to comply with the following subsections:

s. 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, and

(ii) common areas and staff areas, including floors, carpets, furnishings, contact surfaces and wall surfaces;

(b) cleaning and disinfection of the following in accordance with manufacturer's specifications and using, at a minimum, a low level disinfectant in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices:

(i) resident care equipment, such as whirlpools, tubs, shower chairs and lift chairs,

(ii) supplies and devices, including personal assistance services devices, assistive aids and positioning aids, and

(iii) contact surfaces;

(c) removal and safe disposal of dry and wet garbage; and

(d) addressing incidents of lingering offensive odours. O. Reg. 79/10, s. 87 (2).

Findings/Faits saillants :

1. [O.Reg.79/10, s. 87(2)(d)] Lingering offensive odours have not been resolved in the Mapleton Home Area. Urine odours were noted at the end of two separate corridors. According to maintenance staff and personal support workers, carpeting is steam or deep cleaned twice per week and spot treatments are applied when staff identify urine spots. Despite the methods used to date, urine odours persist to linger and are quite offensive.



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WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 27. Care conference

Specifically failed to comply with the following subsections:

s. 27. (1) Every licensee of a long-term care home shall ensure that,

(a) a care conference of the interdisciplinary team providing a resident's care is held within six weeks following the resident's admission and at least annually after that to discuss the plan of care and any other matters of importance to the resident and his or her substitute decision-maker, if any;

(b) the resident, the resident's substitute decision-maker, if any, and any person that either of them may direct are given an opportunity to participate fully in the conferences; and

(c) a record is kept of the date, the participants and the results of the conferences. O. Reg. 79/10, s. 27 (1).

Findings/Faits saillants :

1. [O.Reg. 79/10, s.27(1)(a)] An identified resident and their substitute decision-maker have not attended a care conference with the home's interdisciplinary team within 6 weeks of the resident's admission. The resident was admitted to the home in July 2011 and according to the family and the home's management team, a care conference has not been arranged to date.

Issued on this 28th day of November, 2011

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