



**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 sous la
Loi de 2007 sur les foyers de
soins de longue durée**

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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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Jan 11, 2013	2013_189120_0003	H-002239- 12	Complaint

Licensee/Titulaire de permis

ST. JOSEPH'S HEALTH SYSTEM
56 GOVERNOR'S ROAD, DUNDAS, ON, L9H-5G7

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

ST JOSEPH'S VILLA, DUNDAS
56 GOVERNOR'S ROAD, DUNDAS, ON, L9H-5G7

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.

This inspection was conducted on the following date(s): January 8, 2013

During the course of the inspection, the inspector(s) spoke with the Director of Care, Housekeeping and Laundry Supervisor and housekeeping staff.

During the course of the inspection, the inspector(s) randomly toured resident bedrooms, dining rooms and common areas on 4 home areas on the North side of the complex and reviewed the home's housekeeping schedules and policies and procedures.

The following Inspection Protocols were used during this inspection:



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Accommodation Services - Housekeeping

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	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. 87.
Housekeeping**



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Specifically failed to comply with the following:

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; O. Reg. 79/10, s. 87 (2).

Findings/Faits saillants :

[O. Reg. 79/10, s.87(2)(a)(i)] As part of the organized program of housekeeping under clause 15 (1) (a) of the Act, the licensee has not ensured that procedures which have been developed are implemented for, (a) cleaning of the home, including, (i) resident bedrooms, including floors, carpets, furnishings, privacy curtains, contact surfaces and wall surfaces.

With respect to residents' rooms, the home has developed a cleaning schedule and procedures under their policies titled "Furniture Care", "Damp Dusting" and "Daily Cleaning - Resident Rooms". The schedule directs staff to complete a "deep" dust and vacuum of resident rooms once per week and the policies direct staff to damp dust or spot clean ledges, shelves, miscellaneous furniture, etc. on a daily basis. Based on the observations below, it appears that the home has not implemented the policies completely.

Resident rooms located on the 4th, 2nd and 1st floor home areas of the North Tower were observed to be dusty. The majority of rooms on the 4th and 2nd floors were observed to have dusty decorative wood wall mouldings, wardrobe tops, overbed shelving, and shelving in resident bathrooms. With the exception of the mouldings, the dusty surfaces are all high, hard to reach areas which would require staff to use a step stool. Out of the rooms observed, approximately 25% had excessive amounts of dust on wardrobe and shelving surfaces which could be picked up on the fingers and rolled.



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Issued on this 11th day of January, 2013

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

B. Sosnik