Ministry of Health and Long-Term Care

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch
Ottawa Service Area Office

347 Preston St., 4th Floor
Ottawa ON K1S 3J4
Telephone: 613-569-5602
Facsimile: 613-569-9670

Ministère de la Santé et des Soins de longue durée

Division de la responsabilisation et de la performance du système de santé
Direction de l'amélioration de la performance et de la conformité
Bureau régional de services de Ottawa

347, rue Preston, 4iém étage
Ottawa ON K1S 3J4
Téléphone: 613-569-5602
Télécopieur: 613-569-9670

Ontario

February 9, 2012

Mr. Kyle Cotton
Administrator
Sunnycrest Nursing Home
1635 Dundas Street East
Whitby ON L1N 2K9

Dear Mr. Cotton

Please find enclosed the ***Inspection Report-Public Copy*** for an inspection conducted on January 4, 5, 12, 24 and 31, 2012 under the *Long-Term Care Homes Act, 2007* (LTCHA) for the purpose of ensuring compliance with requirements under the LTCHA.

This inspection report must be posted in the home, in a conspicuous and easily accessible location in accordance with the LTCHA, 2007, S.O. 2007, c.8, s.79 (1) and (2).

A copy of the ***Inspection Report-Public Copy*** must be made available without charge upon request. The report will also be on file with the Ottawa Service Area Office, Performance Improvement and Compliance Branch.

Sincerely

Wendy Berry
LTC Home Inspector – Environmental Health

c President, Resident's Council
President, Family Council

Ontario

Ministry of Health and Long-Term Care

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

Ministére de la Santé et des Soins de longue durée

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

Health System Accountability and Performance Division
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Public Copy/Copie du public

Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jan 4, 5, 12, 24, 31, 2012	2012_028102_0003	Follow up

Licensee/Titulaire de permis

SUNNYCREST NURSING HOMES LIMITED
1635 DUNDAS STREET EAST, WHITBY, ON, L1N-2K9

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

SUNNYCREST NURSING HOME
1635 DUNDAS STREET EAST, WHITBY, ON, L1N-2K9

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

WENDY BERRY (102)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, Assistant Director of Care; Environmental Supervisor; Maintenance person; Registered and non Registered nursing staff, several residents and visitors, and a security system contractor.

During the course of the inspection, the inspector(s) followed up on outstanding compliance orders related to door security; checked the connection of the door alarms to the generator; reviewed generator capacity and components of the emergency plan. The 3 compliance orders related to door security have been complied with. The on site inspection occurred on January 4, 5 and 12, 2012.

The following Inspection Protocols were used during this inspection:

Safe and Secure Home

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Ontario

Ministry of Health and Long-Term Care

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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.) The following constitutes written notification of non-compliance under paragraph 1 of section 152 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. 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. 19. Generators

Specifically failed to comply with the following subsections:

s. 19. (4) The licensee of a home to which subsection (2) or (3) applies shall ensure, not later than six months after the day this section comes into force, that the home has guaranteed access to a generator that will be operational within three hours of a power outage and that can maintain everything required under clauses (1) (a), (b) and (c). O. Reg. 79/10, s. 19 (4).

Findings/Faits saillants :

1. Sunnycrest Nursing Home has Class C beds within the meaning of subsection 187 (18) of the Act.

2. O. Reg. 79/10, s. 19.(1) requires that the home be served by a generator that has the capacity to maintain, in the event of a power outage, the heating system; emergency lighting; and essential services

3. O.Reg. 79/10, s. 9. 4 identifies that all alarms for doors leading to the outside must be connected to a back up power supply unless the home is not served by a generator.

4. The home is currently equipped with a generator that, in the event of a power outage, can provide back up power to refrigeration equipment in the kitchen; corridor lights in the north wing only on 2nd and 3rd floor; circulating pump for the hot water heating system in the north wing.

5. The home's generator and back up electrical panel for the generator, is not set up to maintain in the event of a power outage, the heating system in the west wing; emergency lighting in corridors(west wing), stairways and exits; essential services, including the resident-staff communication and response system, elevators, life support, safety and emergency equipment; and alarms for doors leading to the outside. The home's emergency plan identifies that there is no power generated for "west wings, centre core", and that "Battery operated back-up emergency lighting system will operate for approximately 3 hours." The fire alarm and detection system has battery back up only.

The home does not have guaranteed access to a generator that will be operational within 3 hours of a power outage that can maintain everything required under s. 19.(1). The lack of back up power supply to the heating system, emergency lighting, and one or more of the identified essential services is a potential risk to the comfort, safety and well being of residents. Residents are at increased risk of harm during a power outage.

Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 9. Doors in a home

Specifically failed to comply with the following subsections:

s. 9. (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:
1. All doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access to must be,
i. kept closed and locked,
ii.equipped with a door access control system that is kept on at all times, and
iii.equipped with an audible door alarm that allows calls to be cancelled only at the point of activation and,
A. is connected to the resident-staff communication and response system, or
B. is connected to an audio visual enunciator that is connected to the nurses' station nearest to the door and has a manual reset switch at each door.
1.1. All doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, must be equipped with locks to restrict unsupervised access to those areas by residents.
2. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents.
3. Any locks on bedrooms, washrooms, toilet or shower rooms must be designed and maintained so they can be readily released from the outside in an emergency.
4. All alarms for doors leading to the outside must be connected to a back-up power supply, unless the home is not served by a generator, in which case the staff of the home shall monitor the doors leading to the outside in accordance with the procedures set out in the home's emergency plans. O. Reg. 79/10, s. 9. (1).

Findings/Faits saillants :

1. Sunnycrest Nursing Home is served by an on site generator.

2. Alarms on doors leading to the outside are not connected to a back up power supply. [s.9.1.1.4]

WN #3: The Licensee has failed to comply with O.Reg 79/10, s. 230. Emergency plans

Specifically failed to comply with the following subsections:

s. 230. (4) The licensee shall ensure that the emergency plans provide for the following:
1. Dealing with,
i. fires,
ii. community disasters,
iii. violent outbursts,
iv. bomb threats,
v. medical emergencies,
vi. chemical spills,
vii. situations involving a missing resident, and
viii. loss of one or more essential services.
2. Evacuation of the home, including a system in the home to account for the whereabouts of all residents in the event that it is necessary to evacuate and relocate residents and evacuate staff and others in case of an emergency.
3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the home.
4. Identification of the community agencies, partner facilities and resources that will be involved in responding to the emergency. O. Reg. 79/10, s. 230 (4).

Findings/Faits saillants :

1. O.Reg. 79/10, s. 230(2) identifies that emergency plans for the home are to be in writing.

2. O. Reg. 79/10, s. 19(1)(c) identifies that essential services includes the resident-staff communication and response system, elevators, life support, safety and emergency equipment.

3. The emergency plans for the home are contained in a binder labelled "Emergency Plan Manual". The binder reviewed was located at the 2nd floor nursing station and was identified by staff as the current plan.

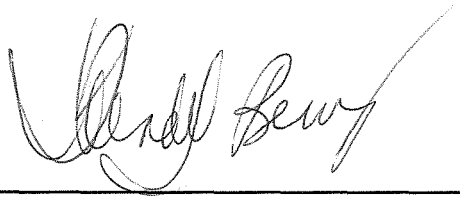
4. Emergency plans did not provide for the loss of one or more essential services: there are no plans in place for the loss of the resident-staff communication and response system; elevators; alarm system on doors to the outside. [s. 230. (4)1.viii]

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 emergency plans include plans for the loss of essential services, to be implemented voluntarily.

Issued on this 31st day of January, 2012

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



Ontario

Ministry of Health and Long-Term Care

Order(s) of the Inspector
Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007,* S.O. 2007, c.8

Ministére de la Santé et des Soins de longue durée

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou de l'article 154 *de la Loi de 2007 sur les foyers de soins de* longue durée, L.O. 2007, chap. 8

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

Public Copy/Copie du public

Name of Inspector (ID #) / Nom de l'inspecteur (No) :	WENDY BERRY (102)
Inspection No. / No de l'inspection :	2012_028102_0003
Type of Inspection / Genre d'inspection:	Follow up
Date of Inspection / Date de l'inspection :	Jan 4, 5, 12, 24, 31, 2012
Licensee / Titulaire de permis :	SUNNYCREST NURSING HOMES LIMITED 1635 DUNDAS STREET EAST, WHITBY, ON, L1N-2K9
LTC Home / Foyer de SLD :	SUNNYCREST NURSING HOME 1635 DUNDAS STREET EAST, WHITBY, ON, L1N-2K9
Name of Administrator / Nom de l'administratrice ou de l'administrateur :	WENTWORTH GRAHAM (ACTING) Kyle Cotton

To SUNNYCREST NURSING HOMES LIMITED, you are hereby required to comply with the following order(s) by the date(s) set out below:

Ontario

Ministry of Health and Long-Term Care

Order(s) of the Inspector
Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007,* S.O. 2007, c.8

Ministére de la Santé et des Soins de longue durée

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou de l'article 154 *de la Loi de 2007 sur les foyers de soins de* longue durée, L.O. 2007, chap. 8

Order # / Ordre no : 001

Order Type / Genre d'ordre : Compliance Orders, s. 153. (1) (a)

Pursuant to / Aux termes de :

O.Reg 79/10, s. 19. (4) The licensee of a home to which subsection (2) or (3) applies shall ensure, not later than six months after the day this section comes into force, that the home has guaranteed access to a generator that will be operational within three hours of a power outage and that can maintain everything required under clauses (1) (a), (b) and (c). O. Reg. 79/10, s. 19 (4).

Order / Ordre :

The licensee will ensure that the home has guaranteed access to a generator that will be operational within 3 hours of a power outage and will be set up to maintain all alarms for doors leading to the outside and everything required under clauses (1) (a), (b) and (c) of O.Reg. 79/10, s. 19(1) including: the heating system; emergency lighting in corridors, hallways and exits; and essential services. Connections made to the generator must conform to all relevant provincial and municipal codes and regulations.

Grounds / Motifs :

1. Sunnycrest Nursing Home has Class C beds within the meaning of subsection 187 (18) of the Act.

2. O. Reg. 79/10, s. 19.(1) requires that the home be served by a generator that has the capacity to maintain, in the event of a power outage, the heating system; emergency lighting; and essential services

3. O.Reg. 79/10, s. 9. 4 identifies that all alarms for doors leading to the outside must be connected to a back up power supply unless the home is not served by a generator.

4. The home is currently equipped with a generator that, in the event of a power outage, can provide back up power to refrigeration equipment in the kitchen; corridor lights in the north wing only on 2nd and 3rd floor; circulating pump for the hot water heating system in the north wing.

5. The home's generator and back up electrical panel for the generator, is not set up to maintain in the event of a power outage, the heating system in the west wing; emergency lighting in corridors(west wing), stairways and exits; essential services, including the resident-staff communication and response system, elevators, life support, safety and emergency equipment; and alarms for doors leading to the outside. The home's emergency plan identifies that there is no power generated for "west wings, centre core", and that "Battery operated back-up emergency lighting system will operate for approximately 3 hours." The fire alarm and detection system has battery back up only.

The home does not have guaranteed access to a generator that will be operational within 3 hours of a power outage that can maintain everything required under s. 19.(1). The lack of back up power supply to the heating system, emergency lighting, and one or more of the identified essential services is a potential risk to the comfort, safety and well being of residents. Residents are at increased risk of harm during a power outage. (102)

This order must be complied with by / Vous devez vous conformer à cet ordre d'ici le : Oct 31, 2012

Ontario

Ministry of Health and Long-Term Care

Order(s) of the Inspector
Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c.8

Ministére de la Santé et des Soins de longue durée

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou de l'article 154 *de la Loi de 2007 sur les foyers de soins de* longue durée, L.O. 2007, chap. 8

REVIEW/APPEAL INFORMATION

TAKE NOTICE:

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order was served on the Licensee.

The written request for review must include,

(a) the portions of the order in respect of which the review is requested;
(b) any submissions that the Licensee wishes the Director to consider; and
(c) an address for services for the Licensee.

The written request for review must be served personally, by registered mail or by fax upon:

Director
c/o Appeals Coordinator
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
55 St. Clair Avenue West
Suite 800, 8th Floor
Toronto, ON M4V 2Y2
Fax: 416-327-7603

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the Licensee decides to request a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

Health Services Appeal and Review Board

Attention Registrar
151 Bloor Street West
9th Floor
Toronto, ON M5S 2T5

and the

Director

Director
c/o Appeals Coordinator
Performance Improvement and Compliance Branch
Ministry of Health and Long-Term Care
55 St. Clair Avenue West
Suite 800, 8th Floor
Toronto, ON M4V 2Y2
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website www.hsarb.on.ca.

Ontario

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Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c.8

Ministére de la Santé et des Soins de longue durée

Ordre(s) de l'inspecteur
Aux termes de l'article 153 et/ou de l'article 154 *de la Loi de 2007 sur les foyers de soins de* longue durée, L.O. 2007, chap. 8

RENSEIGNEMENTS SUR LE RÉEXAMEN/L'APPEL

PRENDRE AVIS

En vertu de l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis peut demander au directeur de réexaminer l'ordre ou les ordres qu'il a donné et d'en suspendre l'exécution.

La demande de réexamen doit être présentée par écrit et est signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au titulaire de permis.

La demande de réexamen doit contenir ce qui suit :

a) les parties de l'ordre qui font l'objet de la demande de réexamen;
b) les observations que le titulaire de permis souhaite que le directeur examine;
c) l'adresse du titulaire de permis aux fins de signification.

La demande écrite est signifiée en personne ou envoyée par courrier recommandé ou par télécopieur au :

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
55, avenue St. Clair Ouest
8e étage, bureau 800
Toronto (Ontario) M4V 2Y2
Télécopieur : 416-327-7603

Les demandes envoyées par courrier recommandé sont réputées avoir été signifiées le cinquième jour suivant l'envoi et, en cas de transmission par télécopieur, la signification est réputée faite le jour ouvrable suivant l'envoi. Si le titulaire de permis ne reçoit pas d'avis écrit de la décision du directeur dans les 28 jours suivant la signification de la demande de réexamen, l'ordre ou les ordres sont réputés confirmés par le directeur. Dans ce cas, le titulaire de permis est réputé avoir reçu une copie de la décision avant l'expiration du délai de 28 jours.

En vertu de l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée, le titulaire de permis a le droit d'interjeter appel, auprès de la Commission d'appel et de révision des services de santé, de la décision rendue par le directeur au sujet d'une demande de réexamen d'un ordre ou d'ordres donnés par un inspecteur. La Commission est un tribunal indépendant du ministère. Il a été établi en vertu de la loi et il a pour mandat de trancher des litiges concernant les services de santé. Le titulaire de permis qui décide de demander une audience doit, dans les 28 jours qui suivent celui où lui a été signifié l'avis de décision du directeur, faire parvenir un avis d'appel écrit aux deux endroits suivants :

À l'attention du registraire
Commission d'appel et de révision des services de santé
151, rue Bloor Ouest, 9e étage
Toronto (Ontario) M5S 2T5

Directeur
a/s Coordinateur des appels
Direction de l'amélioration de la performance et de la conformité
Ministère de la Santé et des Soins de longue durée
55, avenue St. Clair Ouest
8e étage, bureau 800
Toronto (Ontario) M4V 2Y2
Télécopieur : 416-327-7603

La Commission accusera réception des avis d'appel et transmettra des instructions sur la façon de procéder pour interjeter appel. Les titulaires de permis peuvent se renseigner sur la Commission d'appel et de révision des services de santé en consultant son site Web, au www.hsarb.on.ca.

Issued on this 31st day of January, 2012

Signature of Inspector / Signature de l'inspecteur :

Name of Inspector / Nom de l'inspecteur : WENDY BERRY

Service Area Office / Bureau régional de services : Ottawa Service Area Office