



**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
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Direction de l'amélioration de la
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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 7, 2013	2013_178102_0001	000265-12 AND 000917 -12	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



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

This inspection was conducted on the following date(s): January 03 and 04, 2013

Follow up on two compliance orders, both with a compliance date of October 31, 2012.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Acting Director of Care, the maintenance person, registered and non registered nursing staff, several residents and visitors.

During the course of the inspection, the inspector(s) followed up Compliance Orders related to the back up power supply and the condition of flooring in resident areas. The orders were complied with. Resident areas of the home were toured on all floors; emergency power supply was reviewed; the Emergency Plans for the home were reviewed.

The following Inspection Protocols were used during this inspection:

Accommodation Services - Housekeeping

Accommodation Services - Maintenance

Safe and Secure Home

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



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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. 230. Emergency plans

Specifically failed to comply with the following:

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. O. Reg. 79/10, s. 230 (4).**

Findings/Faits saillants :



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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 in a binder located at the 2nd floor nursing station. The Administrator also had a copy of the binder.
4. Emergency plans did not provide for the loss of essential services related to the resident staff communication and response system; elevators; door safety systems other than in a code red situation. [s. 230. (4) 1.]

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 the written emergency plans for the home are updated to identify plans dealing with the loss of essential services including: elevators, resident staff communication and response system, door safety systems, to be implemented voluntarily.

**THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/
LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT CONFORME AUX EXIGENCES:**

COMPLIED NON-COMPLIANCE/ORDER(S) REDRESSEMENT EN CAS DE NON-RESPECT OU LES ORDRES:			
REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / NO DE L'INSPECTION	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 19.	WN #1	2012_028102_0003	102
O.Reg 79/10 s. 19. (4)	CO #001	2012_028102_0003	102



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LTCHA, 2007 S.O. 2007, c.8 s. 3.	WN #2	2012_028102_0019	102
LTCHA, 2007 S.O. 2007, c.8 s. 3.	WN #1	2011_043157_0029	102
LTCHA, 2007 S.O. 2007, c.8 s. 86.	WN #1	2012_028102_0019	102
O.Reg 79/10 s. 87.	WN #2	2012_028102_0019	102
O.Reg 79/10 s. 87.	WN #1	2011_043157_0029	102
O.Reg 79/10 s. 87. (2)	CO #002	2012_028102_0019	102

Issued on this 7th day of January, 2013

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