

To:	Chair Burley and Members of the Committee of Management
Committee Date:	June 12, 2018
Subject / Report No:	LTCR-CM-22-18
Title:	Inspections
Prepared by:	Lynne Johnson, Director of Long Term Care
Reviewed by:	Kim Wingrove, Chief Administrative Officer
Lower Tier(s) Affected:	All Grey County
Status:	

Recommendation

1. That report LTCR-CM-22-18 regarding Facility Inspections be received for information.

Executive Summary

Long Term Care homes are inspected by a variety of bodies that are responsible for oversight. Inspections are usually unscheduled and can be initiated as part of a routine inspection, injury/incident, complaint or follow up to a previous inspection. Key inspecting agencies include:

- Ministry of Health and Long Term Care
- Ministry of Labour
- Public Health
- Fire Department
- Technical Standards and Safety Authority
- Electrical Safety Authority

Background and Discussion

This report reflects inspections that occurred between July 1, 2017 and January 31, 2018. Action plans have been implemented to address any areas of deficiency.

Grey Gables

The following inspections occurred during the reporting time period.

Date of Report (Date of Visit)	Purpose of Visit	Outcome
July 11, 2017	Public Health Inspection	Utensil Cleaning <ul style="list-style-type: none"> • CA <hr/> Furniture, equipment and appliances <ul style="list-style-type: none"> • CA
August 15, 2017	Public Health Vaccine Fridge Inspection	No areas of non-compliance
January 23, 2018	TSSA	Elevator Inspection <ul style="list-style-type: none"> • 2 Orders
January 30, 2018 (Visit- Dec 21, 22, Jan 1, 2)	MOHLTC Complaint Inspection	Resident Bill of Rights <ul style="list-style-type: none"> • WN • VPC <hr/> Lift and Transfers <ul style="list-style-type: none"> • WN • VPC
February 16, 2018 (Visit- Dec 13, 14, 15, 19, 20, 21 and Jan 2, 3, 4, 5, 9, 10)	MOHLTC Resident Quality Inspection	Skin and Wound, <ul style="list-style-type: none"> • WN • CO <hr/> Continence and Bowel Management <ul style="list-style-type: none"> • WN • CO <hr/> Restraints <ul style="list-style-type: none"> • WN • VPC <hr/> Transferring and

Date of Report (Date of Visit)	Purpose of Visit	Outcome
		Positioning <ul style="list-style-type: none"> • WN • VPC <hr/> Dining and Snack Service <ul style="list-style-type: none"> • WN • VPC <hr/> Medications <ul style="list-style-type: none"> • WN • VPC <hr/> 24 Hour Admission Plan <ul style="list-style-type: none"> • WN <hr/> Other <ul style="list-style-type: none"> • 4 CO resolved
<p><u>Legend</u></p> <p><i>CA- Corrective Action Required</i></p> <p><i>WN- Written Notification</i></p> <p><i>VPC- Voluntary Plan of Correction</i></p> <p><i>CO- Compliance Order</i></p>		

Lee Manor

Date of Report (Date of Visit)	Purpose	Outcome
August 24, 2017	Public Health Inspection- Routine	No areas of non-compliance

Date of Report (Date of Visit)	Purpose	Outcome
August 24, 2018	Public Health Vaccine Fridge Inspection	No areas of non-compliance
Jan 18, 2018 (Visit- December 19 and 20, 2017)	MOHLTC Complaint Inspection	<p>Skin and Wound Care</p> <ul style="list-style-type: none"> • WN • VPC <hr/> <p>Pain Management</p> <ul style="list-style-type: none"> • WN • VPC
Feb 12, 2018 (Visit- January 11,15,16,17, 18 and 19 2018)	MOHLTC Resident Quality and Critical Incident Inspection	<p>Skin & Wound</p> <ul style="list-style-type: none"> • WN • CO <hr/> <p>Pain Management</p> <ul style="list-style-type: none"> • WN • CO <hr/> <p>Zero Tolerance for Abuse and Neglect</p> <ul style="list-style-type: none"> • WN • VPC <hr/> <p>Falls Prevention</p> <ul style="list-style-type: none"> • WN • VPC <hr/> <p>Medication Administration</p> <ul style="list-style-type: none"> • WN • VPC <hr/>

Date of Report (Date of Visit)	Purpose	Outcome
		Infection Prevention and Control <ul style="list-style-type: none"> • WN • VPC
<u>Legend</u> WN- Written Notification VPC- Voluntary Plan of Correction CO- Compliance Order		

Rockwood Terrace

Date of Report (Date of Visit)	Purpose of Visit	Outcome
Nov 8/17 (Visit- July 4, 5, 6, 7, 11, 12, 13, 14, 17, 2017)	MOHLTC Resident Quality Inspection	Reported to Committee December 12, 2017, Report LTCR-CM-01-18
August 8, 2017	Public Health-Food Services inspection	No areas of non-compliance
December 4, 2017	Public Health-Food Services Inspection	Furniture, equipment and appliances <ul style="list-style-type: none"> • 3 CA
December 11, 2017	Ministry of Labour-Incident Investigation	No areas of non-compliance
December 13, 2017	Public Health-Hair Services Inspection	No areas of non-compliance
<u>Legend</u> CA- Corrective Action		

Legal and Legislated Requirements

Stakeholder visits and inspections provide feedback on areas for improvement to ensure the homes meet legislative requirements for care and service. When deficiencies are found, the

homes work to bring things back into compliance and the information is used to support process and system improvements. Corrective actions have included:

- Staff education
- Review of policy and procedure
- Monitoring through audits to ensure compliance to regulations
- Capital Expenditure (hand rails and wall protection Rockwood Terrace)

Financial and Resource Implications

N/A

Relevant Consultation

- Internal Administrators- Grey Gables, Lee Manor, Rockwood Terrace
- External (list)

Appendices and Attachments

The links for the Ministry of Health and Long Term Care inspection reports for Grey Gables and Lee Manor for the reporting period July 1, 2017- January 31, 2018 are included as attachments to this report. The Rockwood Terrace Ministry report was provided previously.

[Grey Gables MOHLTC Complaint Inspection Jan 30, 2018](#)

[Grey Gables Resident Quality Inspection February 16, 2018](#)

[Lee Manor MOHLTC Complaint Inspection Report December 19-20 2017](#)

[Lee Manor MOHLTC Resident Quality Inspection Report Jan 11-15-16-17-18-19 2018](#)