



Licensing inspections are conducted as an audit or sampling process to assess compliance with the Act and Regulations at the time of inspection

INSPECTION REPORT

Community Care Facilities Licensing **E 0828**

FACILITY NAME James Bay Care Centre		FACILITY NUMBER 64004851	INSPECTION DATE (DMY) 28/10/2005
ADDRESS 336 Simcoe St		FACILITY PHONE 388-6457	TIME OF VISIT 0930-1330
MANAGER Stan Dubas	LICENSEE CONTACT Stan Dubas-cc	CONTACT PHONE 388-6457	TIME SPENT (hrs. - nearest 1/4) 4 hrs.
<input type="checkbox"/> INITIAL	<input type="checkbox"/> INITIAL PLAYGROUND	1	2
<input checked="" type="checkbox"/> ROUTINE	<input type="checkbox"/> ROUTINE PLAYGROUND	3	4
<input type="checkbox"/> COMPLAINT	<input type="checkbox"/> COMPLAINT PLAYGROUND	NUMBER OF STAFF 130	
<input type="checkbox"/> FOLLOW-UP	<input type="checkbox"/> FOLLOW-UP PLAYGROUND	NUMBER OF VOLUNTEERS 40	
SERVICE TYPE 100		FACILITY VISIT TIME 0930	
IN CARE @ TIME OF INSP. 112		OFFICER J. Vesely + C. Kane	
ENROLLMENT 112			

CRITICAL HAZARD

These items relate to critical Health Hazards and MUST RECEIVE IMMEDIATE ATTENTION

- 1 EMERGENCY MANAGEMENT
 - 101 Policies and Procedures
 - 102 Equipment
 - 103 Staffing
- 2 200 BEHAVIORAL POLICIES & PROCEDURES
- 3 ENVIRONMENTAL HAZARDS
 - 301 Storage Practices
 - 302 Equipment/Furnishings
 - 303 Structural/Maintenance
 - 304 Hazardous Practices
- 4 HEALTH
 - 401 Hygiene
 - 402 Food Service
 - 403 Communicable Disease Control
- 5 500 MEDICATIONS

OPERATION & MAINTENANCE

These items must be corrected within a designated time period.

- 6 ADMINISTRATION
 - 601 Policies and Procedures
 - 602 Staffing
 - 603 Incident Reporting
 - 604 Licensing
 - 605 Records
- 7 700 NUTRITION/FOOD SERVICE
- 8 MEDICATION
 - 801 Storage
 - 802 Administration
 - 803 Review
- 9 PHYSICAL FACILITY
 - 901 Equipment/Furnishings
 - 902 Structure
 - 903 Maintenance and Housekeeping

VHA Facility Coord
Correction Date

CODE	FINDINGS AND ACTIONS REQUIRED
	cc: Sheila Rozee
	Scheduled visit made today for the purpose of completing a routine inspection. Lo's C. Kane and J. Vesely were met by: Stan Dubas; Saa <u>administrative</u>
	Tour of the facility provided by: S. Dubas.
	Initial Observation: Persons in care in/out of rooms; housekeeping taking place this morning.
	*The following items were reviewed at the time of this inspection and were found to be in compliance with the Community Care and Assisted Living Act (CCALA) and Adult Care Regulations (ACR):
	• Licensing - CCALA license is current

HEALTH & SAFETY HAZARD RATING HIGH MODERATE LOW Issue Permit Issue Licence Conditions

FOLLOW UP YES NO Date (DMY) **28/11/05** Next Routine Inspection (DMY) **28/10/2006**

RECEIVE **Saa** PRINT NAME **J. Vesely** LICENSING OFFICER **J. Vesely** PINK COPY - LICENSING OFFICER

JULY 2005 YELLOW COPY - INTERNAL



Community Care Facilities Licensing

INSPECTION SUPPLEMENTARY REPORT

REFERENCE # E0828

James Bay Care Centre

Oct. 28/05

NAME

DATE

CODE	REMARKS	CORRECTION DATE
	<p>and posted.</p> <ul style="list-style-type: none"> • Care Plans - appears in compliance (3rd floor). • Staffing - medical certificate / Tb test in Staff record. persons in care have access to an employee certified to administer 1st aid at all times • Quality Assurance - future accreditation planned. • Policies + Procedures - very comprehensive and appears in compliance. (incident reporting - see below). 	
	The following items were reviewed at the time of this inspection and were found to be in non-compliance with the CCALA + ACR.	
903	<p>Physical facility - maintenance / operations - observations: Rooms 624, 628, 633, 501, 526, 432, 409, 403, 306, 325, 332, 232, 211, 205 inspected at random. chemical products (peri-wash, mouthwash, soap, toothpaste, etc) in resident washrooms / rooms unsecured / locked re: prevention of ingestion by persons-in-care.</p> <p>Legislation: ACR 5.2(11)</p> <p>Corrective Action: please ensure safe and adequate storage for all cleaning agents, chemical products and other hazardous</p>	

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Received By: 322

Printed Name: _____

Inspected By: Juan Vesely

Printed Name: _____



Community Care Facilities Licensing

INSPECTION SUPPLEMENTARY REPORT

REFERENCE # E0828

NAME James Bay Care Centre DATE Oct 28/05

CODE	REMARKS	CORRECTION DATE
903	materials. Please submit a plan to address this by: _____	Nov. 28/05
	Medication - Administration/documentation-observations: PRN medication charting is done on the back of incorrect MAR (e.g. person-in-care # 306). Note: this appears consistently in resident MARs (3rd floor). S2a	
	Legislation: ACR 8.4(6) + ACR 4(3)(d)	
802	Corrective Action: Medication administration/documentation is to follow policies + procedures established + Pharmacy PRN documentation is to occur on the reverse side that PRN med is listed by pharmacy. Please consult pharmacy re: administration + documentation of PRN meds. S2a	Nov. 28/05
	Administration - patient records: observation: resident charts 311, 327, 332, 306a, 323, 323b reviewed. No TB test result present in some of the charts (3 charts had a CXR's in them). No documentation on resident plan of care forms in TB/CXR screening area. S2a	
	Legislation: ACR 4(3)(a).	

005. Corrective Action: all persons being admitted to a _____

PAGE: 3 OF 4

Received By: [Signature] S2a
Printed Name: _____
Inspected By: [Signature] Julie Vesely
Printed Name: Julie Vesely

INSPECTION
SUPPLEMENTARY REPORT



Community Care Facilities Licensing

REFERENCE # E0828

NAME James Bay Care Centre DATE Oct 28/05

CODE	REMARKS	CORRECTION DATE
005	licensed community care facility comply with the immunization program of the ministry and participate in its TB control program. Please obtain records of TB screening for persons in care and permanently keep this in resident charts.	Dec 30/05 Jan 31/06
	Incident Reporting - observations: Policy on incident reporting in place, however, does not include definitions of reportable incidents - Schedule 1 of ACR, nor investigation protocol (licensing/police only to investigate complaints/allegations of abuse/neglect)	
	Legislation: ACR 10.6(3) + ACR 10.7.	
003	Corrective Action: Written policies + procedures acceptable to AMHO for the reporting of incidents must be in place. Investigations conducted by a MHO must not be prevented/hindered. Please add ACR Schedule 1 to your incident reporting policy and include an investigation protocol.	Jan 31/06

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Received By: X S22
 Printed Name: _____
 Inspected By: Juli Vesely
 Printed Name: Juli Vesely