Ontario

Ministry of Long-Term Care

Ministère des Soins de longue durée

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

Rapport d'inspection en vertu de la Loi de 2007 sur les foyers de soins de longue durée

Long-Term Care Operations Division
Long-Term Care Inspections Branch

Division des opérations relatives aux soins de longue durée
Inspection de soins de longue durée

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Dec 22, 2020	2020_520622_0023	022810-20	Complaint

Licensee/Titulaire de permis

Broadview Nursing Centre Limited
210 Brockville Street Smiths Falls ON K7A 3Z4

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

Broadview Nursing Centre
210 Brockville Street Smiths Falls ON K7A 3Z4

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

HEATH HEFFERNAN (622)

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): November 23,24, 25, and December 1, 2, 3, 4, 7, 8, 9, 10, 2020.

The following intake was completed in this Complaint Inspection:

Log #022810-20, IL-84647-OT related to resident care and services.

During the course of the inspection, the inspector(s) spoke with the Director of Care (DOC), the assistant Director of Care, the Director of Nutrition and Dietary manager, the Maintenance Lead, Reception and Scheduling, Registered Practical Nurses (RPNs) and Person Support Workers (PSWs).

Also during the course of the inspection, the inspector reviewed resident health records, staff schedules, resident bath schedules, the applicable licensee's policies, made observations of resident care and services and completed the IPAC Observational Checklist A2.

The following Inspection Protocols were used during this inspection:
Accommodation Services - Maintenance
Dining Observation
Hospitalization and Change in Condition
Infection Prevention and Control
Personal Support Services
Sufficient Staffing

During the course of this inspection, Non-Compliances were issued.
- **2 WN(s)**
- **1 VPC(s)**
- **0 CO(s)**
- **0 DR(s)**
- **0 WAO(s)**

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	Légende 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. 229. Infection prevention and control program

Specifically failed to comply with the following:

s. 229. (4) The licensee shall ensure that all staff participate in the implementation of the program. O. Reg. 79/10, s. 229 (4).

Findings/Faits saillants :

1. The licensee has failed to ensure that that Personal Support Workers (PSWs) participate in the implementation of the Infection Prevention and Control (IPAC) program, in that they did not wear the required protective eye wear.

On two separate dates, one in November and the other in December 2020, inspector #622 observed two resident rooms to be marked for droplet and contact precautions, which indicated staff were to be wearing gloves, gowns, mask and protective eye wear, if performing care on the resident. On those dates a total of four PSWs were observed giving care in those rooms without wearing protective eye wear.

The four PSWs informed inspector #622 that they had not been wearing protective eye wear while performing care.

Sources: review of the resident health records, the licensee's infection, Prevention and Control policy and procedures, interview with the four PSWs and other staff and observation of resident care and services. [s. 229. (4)]

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 all staff participate in the implementation of the program, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 33. Bathing

Specifically failed to comply with the following:

s. 33. (1) Every licensee of a long-term care home shall ensure that each resident of the home is bathed, at a minimum, twice a week by the method of his or her choice and more frequently as determined by the resident's hygiene requirements, unless contraindicated by a medical condition. O. Reg. 79/10, s. 33 (1).

Findings/Faits saillants :

1. The licensee has failed to ensure that a resident was bathed, at a minimum, twice a week by the method of their choice.

The current care plan and the bath schedules for a resident indicated that they should receive two baths per week.

The task documentation on Point Click Care was not completed for the resident's bath on a date in November 2020.

During an interview with a PSW, they stated that since the home was short two staff members on that date in November 2020, they would have been pulled from the bath assignment and the bath for the resident would not have been completed.

Sources: review of the resident health records, resident bath schedules, interview with the PSW and other staff and observation of resident care and services. [s. 33. (1)]

Issued on this 24th day of December, 2020

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

Original report signed by the inspector.