

**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**

Central West Service Area Office
1st Floor, 609 Kumpf Drive
WATERLOO ON N2V 1K8
Telephone: (888) 432-7901
Facsimile: (519) 885-2015

Bureau régional de services de Centre
Ouest
1e étage, 609 rue Kumpf
WATERLOO ON N2V 1K8
Téléphone: (888) 432-7901
Télécopieur: (519) 885-2015

Amended Public Copy/Copie modifiée du rapport public

| Report Date(s)/ Date(s) du Rapport | Inspection No/No de l'inspection | Log #/ No de registre | Type of Inspection / Genre d'inspection |
|---|---|----------------------------------|--|
| Apr 28, 2021 | 2021_739694_0008 (A2)(Appeal/Dir# DR#145) | 002439-21 | Other |

Licensee/Titulaire de permis

Collingwood Nursing Home Limited
250 Campbell Street Collingwood ON L9Y 4J9

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

Collingwood Nursing Home
250 Campbell Street Collingwood ON L9Y 4J9

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

Amended by Alain Plante (Director) - (A2)(Appeal/Dir# DR# 145)

Amended Inspection Summary/Résumé de l'inspection modifié

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**NOTE: This report has been revised to reflect a decision of the Director on a review of the Inspector's order: CO #001
The Director's review was completed on April 23, 2021.
Order(s) CO#001 was/were rescinded and substituted with a Director Order to reflect the Director's review DR# 145.
A copy of the Director Order is attached.**

Issued on this 28th day of April, 2021 (A2) (Appeal/Dir# DR#145)

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

Original report signed by the inspector.

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

Amended by Alain Plante (Director) - (A2)(Appeal/Dir# DR# 145)

Amended Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct an Other inspection.

This inspection was conducted on the following date(s): as an off site inspection on February 10, 11 and 12, 2021.

The following intake was inspected:

Log # 002439-21, related to staff surveillance testing.

During the course of the inspection, the inspector(s) spoke with the Executive Director and the Director of Care.

**The following Inspection Protocols were used during this inspection:
Infection Prevention and Control**

During the course of the original inspection, Non-Compliances were issued.

1 WN(s)

0 VPC(s)

1 CO(s)

0 DR(s)

0 WAO(s)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

| | |
|---|---|
| <p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p> | <p>Légende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p> |
| <p>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.)</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p> | <p>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.)</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p> |

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 174.1 Directives by Minister

Specifically failed to comply with the following:

174.1 (1) The Minister may issue operational or policy directives respecting long-term care homes where the Minister considers it to be in the public interest to do so. 2017, c. 25, Sched. 5, s. 49.

Findings/Faits saillants :

1. The Licensee has failed to ensure that every operational directive that applies to the long-term care home was complied with in relation to Directive #3's staff COVID-19 testing requirements.

On March 17, 2020, the Premier of Ontario Cabinet issued a COVID-19 emergency in the Province of Ontario under the Emergency Management and

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Civil Protection Act.

On March 22, and 30, 2020, Directive #3 was issued and revised on December 7, 2020, to all Long-Term Care Homes (LTC Homes) under the Long-Term Care Homes Act (LTCHA), 2007, under section 77.7 of the Health Protection and Promotion Act (HPPA) R.S.O. 1990, c H.7. by the Chief Medical Officer of Health (CMOH) of Ontario. The CMOH advised that residents of LTC Homes were at immediate and increased risk of COVID-19 and an urgent requirement was made for all LTC Homes to implement measures to protect all residents and staff.

Directive #3 required long-term care home licensees to conduct frequent COVID-19 testing of staff, student placements, and volunteers. The Minister's Directive, as well as the protocols and frequency described in the Ministry of Health's COVID-19 Provincial Testing Guidance, stated that for the duration of the province wide shutdown, long-term care home licensees were required to conduct testing at the grey zone frequency.

Starting December 26, 2020, Ontario was in a province wide lockdown where all of Ontario was considered in the grey lockdown Public Health Unit level. The grey lockdown Public Health Unit level directed that all staff, students, and volunteers of Long-term Care Homes were required to be tested weekly with a polymerase chain reaction (PCR) test.

A PCR test, means a validated real-time PCR assay laboratory test for the novel coronavirus known as COVID-19. The test should be taken as close to every seven days as can practically be achieved, unless testing is conducted more frequently.

A Surveillance Testing report for Collingwood Nursing Home was submitted to the Ministry of Long-Term Care (MLTC). The report stated that during a specified time period five direct care staff were allowed to work due to staffing shortages in the home, when they had not had surveillance testing within seven days.

The licensee not ensuring that all staff members had a weekly PCR test completed prior to them working at the home increased the risk of infectious disease transmission to all residents, health care providers, and visitors of the home.

Sources: Minister's Directive #3, issued on December 7, 2020, DOC interview,

staff schedules, the home's records of staff testing. [s. 174.1 (1)]

Additional Required Actions:

CO # - 001 will be served on the licensee. Refer to the "Order(s) of the Inspector".(A1)

The following order(s) have been amended / Le/les ordre(s) suivant(s) ont été modifiés: CO# 001

**Issued on this 28th day of April, 2021 (A2) (Appeal/Dir# DR#145)
Amended by Alain Plante (Director) - (A2)(Appeal/Dir# DR# 145)**

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

Original report signed by the inspector.

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

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

Long-Term Care Operations Division
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Inspection de soins de longue durée

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Name of Inspector (ID #) /

Nom de l'inspecteur (No) : Amended by Alain Plante (Director) - (A2) Appeal/Dir# DR#145

Inspection No. /
No de l'inspection : 2021_739694_0008 (A2) (Appeal/Dir# DR#145)

Appeal/Dir# /
Appel/Dir#: DR#145 (A2)

Log No. /
No de registre : 002439-21 (A2)

Type of Inspection /
Genre d'inspection : Other

Report Date(s) /
Date(s) du Rapport : Apr 28, 2021(A2)

Licensee /
Titulaire de permis : Collingwood Nursing Home Limited
250 Campbell Street, Collingwood, ON, L9Y-4J9

LTC Home /
Foyer de SLD : Collingwood Nursing Home
250 Campbell Street, Collingwood, ON, L9Y-4J9

Name of Administrator /
Nom de l'administratrice
ou de l'administrateur : Peter Zober

To Collingwood Nursing Home Limited, you are hereby required to comply with the following order(s) by the date(s) set out below:(A2)(Appeal/Dir# DR#145) .The following Order has been rescinded and substituted with Director's order.

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

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 # /**No d'ordre:** 001**Order Type /****Genre d'ordre :** Compliance Orders, s. 153. (1) (a)**Pursuant to / Aux termes de :**

LTCHA, 2007 S.O. 2007, c.8, 174.1 (1) The Minister may issue operational or policy directives respecting long-term care homes where the Minister considers it to be in the public interest to do so. 2017, c. 25, Sched. 5, s. 49.

Order / Ordre :

The licensee must be compliant with s. 174 (1) 1 of the LTCHA, 2007.

Specifically, the licensee must ensure that:

A) All staff, students, and volunteers are tested for covid-19 at the frequency outlined in the Minister's Directive before being allowed to work.

Grounds / Motifs :

1. The Licensee has failed to ensure that every operational directive that applies to the long-term care home was complied with in relation to Directive #3's staff COVID-19 testing requirements.

On March 17, 2020, the Premier of Ontario Cabinet issued a COVID-19 emergency in the Province of Ontario under the Emergency Management and Civil Protection Act.

On March 22, and 30, 2020, Directive #3 was issued and revised on December 7, 2020, to all Long-Term Care Homes (LTC Homes) under the Long-Term Care Homes Act (LTCHA), 2007, under section 77.7 of the Health Protection and Promotion Act (HPPA) R.S.O. 1990, c H.7. by the Chief Medical Officer of Health (CMOH) of Ontario. The CMOH advised that residents of LTC Homes were at immediate and increased risk of COVID-19 and an urgent requirement was made for all LTC Homes to implement measures to protect all residents and staff.

Directive #3 required long-term care home licensees to conduct frequent COVID-19 testing of staff, student placements, and volunteers. The Minister's Directive, as well

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as the protocols and frequency described in the Ministry of Health's COVID-19 Provincial Testing Guidance, stated that for the duration of the province wide shutdown, long-term care home licensees were required to conduct testing at the grey zone frequency.

Starting December 26, 2020, Ontario was in a province wide lockdown where all of Ontario was considered in the grey lockdown Public Health Unit level. The grey lockdown Public Health Unit level directed that all staff, students, and volunteers of Long-term Care Homes were required to be tested weekly with a polymerase chain reaction (PCR) test.

A PCR test, means a validated real-time PCR assay laboratory test for the novel coronavirus known as COVID-19. The test should be taken as close to every seven days as can practically be achieved, unless testing is conducted more frequently.

A Surveillance Testing report for Collingwood Nursing Home was submitted to the Ministry of Long-Term Care (MLTC). The report stated that during a specified time period five direct care staff were allowed to work due to staffing shortages in the home, when they had not had surveillance testing within seven days.

The licensee not ensuring that all staff members had a weekly PCR test completed prior to them working at the home increased the risk of infectious disease transmission to all residents, health care providers, and visitors of the home.

Sources: Minister's Directive #3, issued on December 7, 2020, DOC interview, staff schedules, the home's records of staff testing. [s. 174.1 (1)]

An order was made by taking the following factors into account:

Severity: By not following the Ministers Directive in relation to COVID-19 testing requirements residents and staff were put at risk for transmission of the infection.

Scope: This non-compliance was widespread as five staff working in different areas of the home did not have the required surveillance testing which put all residents and staff in four of the six home areas at risk.

Compliance History: Forty-two written notifications (WN), twenty-six voluntary plans of correction (VPCs), and five compliance orders (CO), all of which have been

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2007, chap. 8

complied, were issued to the home related to different sections of the legislation in
the past 36 months.

(694)

This order must be complied with by /

Vous devez vous conformer à cet ordre d'ici le :

Feb 26, 2021(A1)

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

Ordre(s) de l'inspecteur

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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, commercial courier or by fax upon:

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
1075 Bay Street, 11th Floor
Toronto, ON M5S 2B1
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, when service is made by a commercial courier it is deemed to be made on the second business day after the day the courier receives the document, 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:

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

Ordre(s) de l'inspecteur

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foyers de soins de longue durée*, L.O.
2007, chap. 8

Health Services Appeal and Review Board and the Director

Attention Registrar
Health Services Appeal and Review Board
151 Bloor Street West, 9th Floor
Toronto, ON M5S 1S4

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
1075 Bay Street, 11th Floor
Toronto, ON M5S 2B1
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.

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2007, c. 8

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2007, chap. 8

**RENSEIGNEMENTS RELATIFS AUX RÉEXAMENS DE DÉCISION ET AUX
APPELS**

PRENEZ AVIS :

Le/la titulaire de permis a le droit de faire une demande de réexamen par le directeur de cet ordre ou de ces ordres, et de demander que le directeur suspende cet ordre ou ces ordres conformément à l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée.

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

La demande écrite doit comporter ce qui suit :

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

La demande de réexamen présentée par écrit doit être signifiée en personne, par courrier recommandé, par messagerie commerciale ou par télécopieur, au :

Directeur
a/s du coordonnateur/de la coordonnatrice en matière d'appels
Direction de l'inspection des foyers de soins de longue durée
Ministère des Soins de longue durée
1075, rue Bay, 11e étage
Toronto ON M5S 2B1
Télécopieur : 416-327-7603

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Quand la signification est faite par courrier recommandé, elle est réputée être faite le cinquième jour qui suit le jour de l'envoi, quand la signification est faite par messagerie commerciale, elle est réputée être faite le deuxième jour ouvrable après le jour où la messagerie reçoit le document, et lorsque la signification est faite par télécopieur, elle est réputée être faite le premier jour ouvrable qui suit le jour de l'envoi de la télécopie. Si un avis écrit de la décision du directeur n'est pas signifié au/à la titulaire de permis dans les 28 jours de la réception de la demande de réexamen présentée par le/la titulaire de permis, cet ordre ou ces ordres sont réputés être confirmés par le directeur, et le/la titulaire de permis est réputé(e) avoir reçu une copie de la décision en question à l'expiration de ce délai.

Le/la titulaire de permis a le droit d'interjeter appel devant la Commission d'appel et de révision des services de santé (CARSS) de la décision du directeur relative à une demande de réexamen d'un ordre ou des ordres d'un inspecteur ou d'une inspectrice conformément à l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée. La CARSS est un tribunal autonome qui n'a pas de lien avec le ministère. Elle est créée par la loi pour examiner les questions relatives aux services de santé. Si le/la titulaire décide de faire une demande d'audience, il ou elle doit, dans les 28 jours de la signification de l'avis de la décision du directeur, donner par écrit un avis d'appel à la fois à :

la Commission d'appel et de révision des services de santé et au directeur

À l'attention du/de la registrateur(e)
Commission d'appel et de révision
des services de santé
151, rue Bloor Ouest, 9e étage
Toronto ON M5S 1S4

Directeur
a/s du coordonnateur/de la coordonnatrice en matière
d'appels
Direction de l'inspection des foyers de soins de longue durée
Ministère des Soins de longue durée
1075, rue Bay, 11e étage
Toronto ON M5S 2B1
Télécopieur : 416-327-7603

À la réception de votre avis d'appel, la CARSS en accusera réception et fournira des instructions relatives au processus d'appel. Le/la titulaire de permis peut en savoir davantage sur la CARSS sur le site Web www.hsarb.on.ca.

Issued on this 28th day of April, 2021 (A2) (Appeal/Dir# DR#145)

**Signature of Inspector /
Signature de l'inspecteur :**

**Name of Inspector / Amended by Alain Plante (Director) - (A2)(Appeal/Dir# DR# 145)
Nom de l'inspecteur :**

Order(s) of the Inspector

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

Central West Service Area Office