

Ministry of Long-Term Care

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

Hamilton District

119 King Street West, 11th Floor
Hamilton, ON, L8P 4Y7
Telephone: (800) 461-7137

Original Public Report

Report Issue Date: July 29, 2024

Inspection Number: 2024-1101-0002

Inspection Type:

Complaint

Licensee: 955464 Ontario Limited

Long Term Care Home and City: Crescent Park Lodge, Fort Erie

INSPECTION SUMMARY

The inspection occurred offsite on the following dates: May 22-23, 27-28, 30-31, 2024, June 3, 7, 10-13, 18-19, 2024 and July 2, 10, 16-18, 2024

The following intake was inspected:

- Intake: #00116501 – complaint related to records required for employment

The following **Inspection Protocols** were used during this inspection:

Safe and Secure Home

INSPECTION RESULTS

WRITTEN NOTIFICATION: INFECTION PREVENTION AND CONTROL PROGRAM

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 102 (12) 4.

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Infection prevention and control program

s. 102 (12) The licensee shall ensure that the following immunization and screening measures are in place:

4. Staff is screened for tuberculosis and other infectious diseases in accordance with any standard or protocol issued by the Director under subsection (2).

The Fixing Long Term Care Act, 2021, (FLTCA) s. 2 states: "staff", in relation to a long-term care home, means persons who work at the home,

(a) as employees of the licensee,

(b) pursuant to a contract or agreement with the licensee, or

(c) pursuant to a contract or agreement between the licensee and an employment agency or other third party; ("personnel")

According to the Infection Prevention and Control (IPAC) Standard, s. 11.2, the licensee was required to ensure that staff were screened for Tuberculosis (TB) and other infectious diseases at time of hire in accordance with evidence-based practices and where there were none, in accordance with prevailing practices.

The licensee failed to ensure that agency staff that were hired by the home pursuant to a contract were screened for TB in accordance with evidence-based practices. Twenty agency staff were not screened for TB at time of hire in accordance with evidence-based practices. These agency staff did not have any resident interaction, nor did they enter the resident care areas.

Sources: The home's letter of understanding with the identified staffing agency, staffing agency staff records; Interviews with the Administrator, and the Director of Nursing Operations.

WRITTEN NOTIFICATION: EXEMPTIONS, TRAINING

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

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Non-compliance with: O. Reg. 246/22, s. 262 (2)

Exemptions, training

s. 262 (2) The licensee shall ensure that the persons described in clauses (1) (a) to (c) are provided with information about the items listed in paragraphs 1, 3, 4, 5, 7, 8 and 9 of subsection 82 (2) of the Act before providing their services.

Items listed under the FLTCA, 2021, s. 82 (2) paragraphs 1, 3, 4, 5, 7, 8, and 9 were as follows:

1. The Residents' Bill of Rights.
3. The long-term care home's policy to promote zero tolerance of abuse and neglect of residents.
4. The duty under section 28 to make mandatory reports.
5. The protections afforded by section 30.
7. Fire prevention and safety.
8. Emergency and evacuation procedures.
9. Infection prevention and control.

The licensee failed to ensure that 24 agency staff who did not provide direct care to residents, were provided with information about the item listed in paragraph 3 of subsection 82 (2) of the Act, before providing their services.

Sources: The home's letter of understanding with the identified staffing agency, staffing agency staff records; Interviews with the Administrator, and the Director of Nursing Operations.