

Ministry of Long-Term Care

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

Central West District

609 Kumpf Drive, Suite 105
Waterloo, ON, N2V 1K8
Telephone: (888) 432-7901

Public Report

Report Issue Date: January 22, 2025

Inspection Number: 2025-1268-0001

Inspection Type:

Critical Incident

Licensee: Eden House Care Facility Inc.

Long Term Care Home and City: Eden House Nursing Home, Guelph

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): January 15-16, 20-22, 2025

The following intake(s) were inspected:

- Intake: #00133532 - allegation of staff to resident neglect
- Intake: #00135725 - disease outbreak

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

Infection Prevention and Control
Prevention of Abuse and Neglect

INSPECTION RESULTS

WRITTEN NOTIFICATION: Duty of licensee to comply with plan

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

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Non-compliance with: FLTCA, 2021, s. 6 (7)

Plan of care

s. 6 (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

The licensee failed to ensure a resident was supervised at all times during certain aspects of their care. The resident fell and was injured.

Sources: review of a resident's clinical record, critical incident, interview with staff, Toileting/Meals/Medication policy, last revised 01/24

COMPLIANCE ORDER CO #001 Infection prevention and control program

NC #002 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 102 (2) (b)

Infection prevention and control program

s. 102 (2) The licensee shall implement,

(b) any standard or protocol issued by the Director with respect to infection prevention and control. O. Reg. 246/22, s. 102 (2).

The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:

The licensee shall:

A) Review the Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes April 2022, revised September 2023 with the home's Infection Prevention and Control (IPAC) Lead, managers and registered staff. Specifically review:

-responsibilities of the IPAC Lead, additional requirements 2.1,

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- training and education, additional requirements 7.3,
- IPAC policies and procedures, new: additional requirements under the standard 5.6,

Document the education including the date, format and staff attending the training, including the staff member who provided the education, and include a copy of the content of the education for review.

B) review and revise the home's cleaning frequency policy to include a risk stratification approach for frequency of cleaning and disinfecting. Include a process to ensure that the surfaces are cleaned at the required frequency.

C) Provide education to the IPAC Lead, managers and housekeeping staff on the cleaning frequency policy and procedure revisions. Review Best Practices for Environmental Cleaning for Prevention and Control of Infections in All Health Care Settings, 3rd Edition, April 2018, specifically Appendix 21: Risk Stratification Matrix to Determine Frequency of Cleaning.

Document the education including the date, format and staff attending the training, including the staff member who provided the education, and include a copy of the content of the education for review.

D) Develop and implement a policy and procedure for the home to ensure that adequate personnel are available on each shift to complete required surface cleaning and disinfection.

Review this policy and procedures with the IPAC Lead, managers, housekeeping staff. Document the review including the date, format and staff attending the review, including the staff member who provided the review, and include a copy of the

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content of the review.

Grounds

As outlined in the Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes, revised September 2023, the licensee failed to ensure:

a) that there were policies and procedures in place to determine the frequency of surface cleaning and disinfection using a risk stratification approach, and to ensure that surfaces were cleaned at the required frequency. The home's policy for cleaning frequency did not include this approach.

b) adequate personnel were to be available on each shift to complete required surface cleaning and disinfection. The home had no assigned personnel for cleaning and disinfection on the evening or night shifts.

c) that audits were performed regularly (at least quarterly) to ensure that all staff could perform the IPAC skills required of their role. Audits had not been completed by the home related to IPAC role specific skills.

Sources: Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes April 2022 Revised September 2023, interviews with staff

This order must be complied with by March 10, 2025

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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/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). 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 or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

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If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

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 an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

Health Services Appeal and Review Board

Attention Registrar
151 Bloor Street West, 9th Floor

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Director

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Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website www.hsarb.on.ca.