

Ministry of Long-Term Care

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

London District

130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

Original Public Report

Report Issue Date: October 3, 2024

Inspection Number: 2024-1543-0004

Inspection Type:

Critical Incident
Follow up

Licensee: Corporation of the County of Elgin

Long Term Care Home and City: Elgin Manor, St Thomas

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): September 23-25, 2024.
(inclusive)

The following intake(s) were inspected:

- Intake: #00122647 related to – Outbreak.
- The following intake was also completed as part of the above inspection:
Intake: #00120121 also related to an outbreak

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Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2024-1543-0002 related to FLTCA, 2021, s. 24 (1) was inspected.

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

Infection Prevention and Control
Staffing, Training and Care Standards

INSPECTION RESULTS

COMPLIANCE ORDER CO #001 Infection prevention and control program

NC #001 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 102 (7) 11.

Infection prevention and control program

s. 102 (7) The licensee shall ensure that the infection prevention and control lead designated under subsection (5) carries out the following responsibilities in the home:

11. Ensuring that there is in place a hand hygiene program in accordance with any standard or protocol issued by the Director under subsection (2) which includes, at a minimum, access to hand hygiene agents at point-of-care. O. Reg. 246/22, s. 102 (7).

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

The licensee shall:

- 1) Ensure that the Infection Prevention and Control (IPAC) lead or Hand Hygiene (HH) champions perform weekly hand hygiene audits at point of care (POC) in a resident room on both Orchard Grove and Garden Grove, each week until order complied;
- 2) Ensure to document the HH audits at POC and actions made based on the HH audit at POC results;
- 3) Ensure Alcohol Based Hand Rub (ABHR) is always available at POC in resident rooms for resident personal care on Orchard Grove and Garden Grove.

Grounds

The licensee has failed to ensure that the home's hand hygiene program included at a minimum access to hand hygiene agents at point-of-care in resident rooms.

During an interview with the IPAC lead it was identified there was no ABHR available at POC in resident rooms on two home units. During this inspection, observations by two inspectors confirmed there was no ABHR available in resident rooms on the identified units.

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Interviews with the home's staff confirmed ABHR was previously removed from resident rooms.

The IPAC Standard and the home's Hand Hygiene policy state ABHR must have been available at POC. By removing ABHR from resident rooms, the licensee increased the risk of missed hand hygiene (HH) at point of care for approximately 60 residents (greater than 65% of the home).

ABHR should have been available at all four moments of hand hygiene. Two home units did not have ABHR inside resident rooms at POC. The LTCH policy indicated:

- 1) "Hand hygiene is the single most important control strategy against the spread of infectious disease."
- 2) "Alcohol-based hand rub is the preferred method for cleaning hands. It is better than washing hands (even with antibacterial soap) when hands are not visibly soiled."
- 3) "Hand hygiene should not be carried out at a patient sink, as this may re-contaminate the Health Care Worker's (HCW's) hands". and
- 4) "Hands should be cleaned using ABHR after glove removal, if a dedicated staff hand washing sink is not immediately available".

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A staff acknowledged HH was easier when ABHR was available in the resident rooms at POC, as staff were not required to open the door until after HH was completed.

The lack of ABHR at POC increased the risk of potential transmission of infectious agents.

Sources: Observations made September 25, 2024, interviews with IPAC lead, Administrator and other front line staff, review of the home's policy and procedure title "Hand Hygiene Program" and the IPAC Self- assessment Audit dated 2024-08-29

This order must be complied with by November 1, 2024

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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

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e-mail: MLTC.AppealsCoordinator@ontario.ca

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:

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Health Services Appeal and Review Board

Attention Registrar
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
438 University Avenue, 8th Floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

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.