

**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
Mar 2, 2021	2021_633577_0004	003187-21	Other

Licensee/Titulaire de permis

Riverside Health Care Facilities Inc.
110 Victoria Avenue Fort Frances ON P9A 2B7

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

EMO Health Centre
170 Front Street P.O. Box 390 Emo ON P0W 1E0

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

DEBBIE WARPULA (577)

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): February 25 and 26, and March 1, 2021.

**The following intake was inspected upon during this Other inspection:
-One intake concerning information gathered for surveillance testing.**

During the course of the inspection, the inspector(s) spoke with the Administrator, one Registered Nurse (RN), one Health Care Aide (HCA) and the Public Health Nurse with the North Western Health Unit Rainy River.

During the course of the inspection, the inspector reviewed relevant staff testing schedules, the Minister's Directive - COVID 19: Long-Term Care Home Surveillance Testing and Access to Homes, and a Memorandum "Provincewide Shutdown to Stop Spread of COVID-19" from the Assistant Deputy Minister to the Long Term Care Stakeholders.

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

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

1 WN(s)

1 VPC(s)

0 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:

s. 174.1 (3) Every licensee of a long-term care home shall carry out every operational or policy directive that applies to the long-term care home. 2017, c. 25, Sched. 5, s. 49.

Findings/Faits saillants :

1. The licensee has failed to ensure that two staff members who entered Emo Health Center had been tested every week for COVID-19 as per the most current and applicable Minister's Directive.

The Minister's Directive was issued pursuant to s. 174.1 of the Long-Term Care Homes Act, 2007 (Act), which authorized the Minister of Long-Term Care to issue operational or policy directives respecting long-term care homes where the Minister considers it in the public interest to do so. Every licensee shall carry out every operational or policy directive that applied to the long-term care home. This Directive was effective as of January 8, 2021, and replaced the previous version of this Directive dated November 23, 2020.

The Minister's Directive indicated:

1.1.1 Test Frequency for Staff, Student Placements and Volunteers.

Every licensee of a long-term care home shall ensure that where a staff, student placement or volunteer takes one validated real-time polymerase chain reaction (PCR) Test every week for long-term care homes in public health unit regions in Orange-Restrict, Red-Control or Grey-Lockdown levels. The time period between testing should be as close to seven days as can practically be achieved, unless testing is conducted more frequently.

The Administrator indicated that one staff member had worked two days in February 2021 and the other staff member had worked three days in February 2021, without having a PCR test within the previous seven days.

Sources: Testing schedule dates for two staff members, interview with the Administrator and other staff, and the Minister's Directive effective January 8, 2021. [s. 174.1 (3)]

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 the Minister's Directive pursuant to s. 174. 1 is followed, with respect to the policy directive for surveillance testing, to be implemented voluntarily.

Issued on this 3rd day of March, 2021

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

Original report signed by the inspector.