

Ministère des Soins de longue durée

**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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## Public Copy/Copie du rapport public

Report Date(s) /

Apr 8, 2021

Inspection No / Date(s) du Rapport No de l'inspection

2021 769646 0004

Loa #/ No de registre

020698-20, 020699-20, 003111-21

Type of Inspection / **Genre d'inspection** 

Critical Incident System

## Licensee/Titulaire de permis

Cedarvale Terrace LTC Inc. as general partner of Cedarvale Terrace LTC Limited **Partnership** 

c/o All Seniors Care Living Centres 175 Bloor Street East, Suite 601 Toronto ON M4W 3R8

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

Cedarvale Terrace 429 Walmer Road Toronto ON M5P 2X9

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs IVY LAM (646)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): Onsite inspection: March 2, 3, 4, 5, 8, 9, 11, and 12, 2021. Offsite inspection: March 15 and 16, 2021.

The following intakes were completed as part of the follow-up inspection:

- Log #020698-20 related to communication, and
- Log #020699-20 related to responsive behaviours.

The following intake was completed during this CIS inspection:

- Log #003111-21 related to infection prevention and control for a COVID-19 outbreak.

During the course of the inspection, the inspector(s) spoke with the Executive Director (ED), Director of Care (DOC), Behavioural Support Manager (BSM), Registered Dietitian (RD), Food Service Manager (FSM), Food Service Supervisor (FSS), Infection Prevention and Control (IPAC) Manager, Environmental Manager (EM), Housekeepers, Program Therapist, Physiotherapist (PT), Unit Managers (UM), Registered Nurses (RN), Registered Practical Nurses (RPN), Personal Support Workers (PSW), and Residents.

During the course of this inspection, the inspector conducted a tour of the longterm care home, conducted observations, including home's processes, staffresident interactions and resident care provision; and reviewed residents' and home's records, relevant policies and procedures.

The following Inspection Protocols were used during this inspection: Infection Prevention and Control Personal Support Services Responsive Behaviours

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)



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The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

	TYPE OF ACTION/ GENRE DE MESURE		INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 43.	CO #001	2020_769646_0012	646
LTCHA, 2007 S.O. 2007, c.8 s. 6. (4)	CO #002	2020_769646_0012	646



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

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 229. Infection prevention and control program

Specifically failed to comply with the following:

s. 229. (5) The licensee shall ensure that on every shift, (b) the symptoms are recorded and that immediate action is taken as required. O. Reg. 79/10, s. 229 (5).

Findings/Faits saillants :



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1. The licensee has failed to ensure that staff on every shift recorded symptoms of infection for a resident.

The resident was identified with a respiratory infection. Their progress notes and assessment forms showed they were not monitored for signs and symptoms of infection on four shifts during the period of infection.

The home's policy states that a specific assessment form was to be used for residents who have confirmed respiratory infections only, with the outcome that there would be documented evidence that residents with infections were assessed every shift.

The Infection Prevention and Control (IPAC) manager stated that all residents are screened and monitored for signs and symptoms of infection, and have their temperatures checked and documented twice daily. For residents who have symptoms of infection, staff should complete the assessment form every shift until the infection is resolved.

The Executive Director (ED) stated that numerous other residents had the respiratory infection at that time, and staff were busy and may not have had time to complete documentation for the resident. The ED stated staff should have assessed and documented the resident's symptoms of infection every shift on the specified assessment form or the progress notes, but it was not done for the resident on the four above mentioned shifts.

[Sources: Resident's progress notes, Clinical Assessment form, resident's eMAR, home's policy; interviews with the Infection Prevention and Control (IPAC) manager, Executive Director (ED), and other staff] [s. 229. (5) (b)]

## 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 symptoms indicating the presence of infection in residents are recorded on every shift, to be implemented voluntarily.



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Issued on this 13th day of April, 2021

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

Original report signed by the inspector.