

**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 25, 2021	2021_853692_0003	001795-21, 001800-21	Follow up

Licensee/Titulaire de permis

1895357 Ontario Inc.
1202 Highway 94 Corbeil ON P0H 1K0

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

Nipissing Manor Nursing Care Center
1202 Highway 94 Corbeil ON P0H 1K0

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

SHANNON RUSSELL (692), JENNIFER BROWN (647), TRACY MUCHMAKER (690)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): March 15-19, 2021.

The following intake(s) were inspected upon during this Follow Up Inspection:

-One log, which was related to compliance order #001 from inspection report #2021_841679_0002, where the home was ordered to comply with section 229 subsection 4 of the Ontario Regulations 79/10, related to the licensee ensuring that all staff participated in the implementation of the Infection Prevention and Control (IPAC) program, specifically, to ensure that when residents required isolation precautions, appropriate signage was posted that indicated the type of Personal Protective Equipment (PPE) required and to ensure that the resident's plan of care was updated that included the isolation precautions required, with a compliance due date of February 26, 2021; and,

-One log, which was related to compliance order #001 from inspection report #2021_841679_0001, where the home was ordered to comply with section 24 subsection 1 of the Long-Term Care Homes Act (LTCHA), 2007, related to the licensee ensuring that any person who had reasonable grounds to suspect that abuse of a resident or neglect of a resident that resulted in harm or a risk of harm to the resident immediately reported the suspicion, and the information upon which it was based to the Director, with a compliance due date of February 26, 2021.

A Critical Incident System Inspection #2021_853692_0004 was conducted concurrently with this inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Public Health Specialists with the Canadian Red Cross Epidemic Prevention Team, Housekeeper(s), Registered Nurses (RNs), Registered Practical Nurses (RPNs), Personal Support Workers (PSWs), and residents.

The Inspector(s) also conducted a daily tour of resident care areas, observed the provision of care and services to residents, observed staff to resident and resident to resident interactions, observed infection control practices, reviewed relevant health care records, as well as licensee policies, procedures and programs.

The following Inspection Protocols were used during this inspection:

Infection Prevention and Control

During the course of this inspection, Non-Compliances were not issued.

- 0 WN(s)**
- 0 VPC(s)**
- 0 CO(s)**
- 0 DR(s)**
- 0 WAO(s)**

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:

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 229. (4)	CO #001	2021_841679_0002		692
LTCHA, 2007 S.O. 2007, c.8 s. 24. (1)	CO #001	2021_841679_0001		692

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>

Issued on this 26th day of March, 2021

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

Original report signed by the inspector.