

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: August 14, 2025

Inspection Number: 2025-1246-0004

Inspection Type:

Critical Incident

Licensee: Extendicare (Canada) Inc.

Long Term Care Home and City: Riverbend Place, Cambridge

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): August 12-14, 2025

The following intake(s) were inspected:

-Intake: #00153310 related to infection prevention and control (IPAC)

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

Infection Prevention and Control

INSPECTION RESULTS

WRITTEN NOTIFICATION: Infection Prevention and Control Program

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

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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 licensee has failed to ensure that the IPAC Standard for Long-Term Care Homes (LTCHs) issued by the Director was implemented in the home.

As per the IPAC Standard for LTCHs under section 9.1, the licensee shall ensure that Routine Practices and Additional Precautions are followed in the IPAC program. At a minimum, the proper use of personal protective equipment (PPE), including appropriate selection, application, removal and disposal are required.

A resident was under Contact Precautions which required staff to don gloves and a gown when providing direct care.

A Personal Support Worker (PSW) did not don a gown when they provided continence care to the resident.

Sources: IPAC Standard for LTCHs, Resident's clinical records, Observation of care, and interviews with staff.

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**WRITTEN NOTIFICATION: Infection Prevention and Control
Program**

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 102 (9) (a)

Infection prevention and control program

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s. 102 (9) The licensee shall ensure that on every shift,
(a) symptoms indicating the presence of infection in residents are monitored in accordance with any standard or protocol issued by the Director under subsection (2); and

The licensee has failed to ensure that three residents with symptoms that indicated the presence of infection were monitored and assessed every shift.

Sources: CI report, Residents' Assessments, IPAC Standard for LTCHs, and interviews with staff.

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