

**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**

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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Oct 19, 2021	2021_923751_0002	013670-21, 013932-21	Critical Incident System

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**Licensee/Titulaire de permis**

Schlegel Villages Inc.  
325 Max Becker Drive Suite. 201 Kitchener ON N2E 4H5

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

The Village of Riverside Glen  
60 Woodlawn Road East Guelph ON N1H 8M8

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

ROBERT SPIZZIRRI (705751), AMY ABBOTT (694420), SHARON PERRY (155)

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**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): October 8, 12, 13, 14, 15 of 2021.**

**The following intakes were completed in this critical incident system inspection:  
Log #013932-21 related to a fall resulting in injury  
Log #013670-21, follow up to compliance order #001 from inspection  
#2021\_610633\_0014 related to infection prevention and control practices, with a  
compliance due date of September 6, 2021.**

**During the course of the inspection, the inspector(s) spoke with General Manager, Assistant General Manager, Director of Nursing Care, Assistants Director of Nursing Care, Registered Nurse, Registered Practical Nurse, Personal Support Workers, Housekeepers, residents and family.**

**During the course of the inspection, the inspectors observed resident and staff interactions, infection prevention and control practices, and reviewed clinical health records, relevant home policies and procedures, education records, and other pertinent documents.**

**Inspector #605 was also present during this inspection**

**The following Inspection Protocols were used during this inspection:  
Falls Prevention  
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)**

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_610633_0014		705751

**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

Legend	Légende
<p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</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>

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**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 101.  
Conditions of licence**

**Specifically failed to comply with the following:**

**Conditions of licence**

**s. 101. (3) It is a condition of every licence that the licensee shall comply with this Act, the Local Health System Integration Act, 2006, the Connecting Care Act, 2019, the regulations, and every directive issued, order made or agreement entered into under this Act and those Acts.**

**Findings/Faits saillants :**

1. The licensee has failed to comply with compliance order #001 from inspection 2021\_610633\_0014 issued on August 18, 2021 with a compliance due date of September 6, 2021.

The home was to ensure that all staff and visitors on two identified resident home areas were retrained on hand hygiene and donning and doffing personal protective equipment. A record of the training was to be kept available at the home.

The home failed to retrain all staff on the identified home areas. The home prioritized educating nursing staff, not all staff. Upon reviewing the information provided by the home, approximately 70% of all staff were not educated for both hand hygiene, and donning and doffing of personal protective equipment.

The assistant general manager acknowledged that the home was not successfully able to educate all staff.

By not ensuring all staff were educated on the identified home areas, staff may not have performed hand hygiene and donned and doffed personal protective equipment according to best practice.

Sources: Compliance Order #001, staff education binder, visitor education binder, Assistant General Manager, and other staff. [s. 101. (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 licensee shall comply with this Act, the Local Health System Integration Act, 2006, the Connecting Care Act, 2019, the regulations, and every directive issued, order made or agreement entered into under this Act and those Acts, to be implemented voluntarily.***

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**Issued on this 20th day of October, 2021**

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

**Original report signed by the inspector.**