

Inspection Report Under the Fixing Long-Term Care Act, 2021

Ministry of Long-Term Care

Long-Term Care Operations Division Long-Term Care Inspections Branch

Hamilton District

119 King Street West, 11th Floor Hamilton, ON, L8P 4Y7 Telephone: (800) 461-7137

Original Public Report

Report Issue Date: October 4, 2024

Inspection Number: 2024-1505-0004

Inspection Type:Critical Incident

Licensee: Shalom Manor Long Term Care Home

Long Term Care Home and City: Shalom Manor Long Term Care Home, Grimsby

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): September 23, 24, and September 27, 2024

The following intake(s) were inspected:

• Intake: #00114666 - was related to falls prevention and management

The following Inspection Protocols were used during this inspection:

Infection Prevention and Control Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Infection prevention and control program



Inspection Report Under the Fixing Long-Term Care Act, 2021

Ministry of Long-Term Care

Long-Term Care Operations Division Long-Term Care Inspections Branch

Hamilton District

119 King Street West, 11th Floor Hamilton, ON, L8P 4Y7 Telephone: (800) 461-7137

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

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 any standard or protocol issued by the Director with respect to infection prevention and control was complied with. In accordance with the "Infection Prevention and Control (IPAC) Standard for Long Term Care Homes, revised September 2023". Additional Requirement 10.4 (d i. under the IPAC standard directs, the licensee shall also include monthly audits of adherence to the four moments of hand hygiene by staff.

Rationale and Summary

Record review of the home's hand hygiene audits failed to locate staff hand hygiene audit for August 2024. During an interview with a staff member, it was confirmed that staff hand hygiene audits were not completed in August 2024.

Failure to ensure monthly staff hand hygiene audits were completed put the residents at an increased risk of infection transmission.

Sources: Staff hand hygiene audits and an interview with a staff member.