Ontario

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

Central East District
33 King Street West, 4th Floor
Oshawa, ON, L1H 1A1
Telephone: (844) 231-5702

Public Report

Report Issue Date: April 24, 2025

Inspection Number: 2025-1069-0002

Inspection Type:
Complaint
Follow up

Licensee: Omni Quality Living (East) Limited Partnership by its general partner, Omni Quality Living (East) GP Ltd.

Long Term Care Home and City: Springdale Country Manor, Peterborough

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): April 15-17 and 22-24, 2025.

The following intake(s) were inspected:

Intake: #00135284 - Follow-up #: 1 - O. Reg. 246/22, s. 102 (7) 4, Infection prevention and control program-Compliance Order #004, under inspection 2024-1069-0005, CDD April 4, 2025.

Intake: #00143969 - Complaint regarding resident care and an environmental emergency.

Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:
Order #004 from Inspection #2024-1069-0005 related to O. Reg. 246/22, s. 102 (7) 4.

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

Resident Care and Support Services
Infection Prevention and Control
Safe and Secure Home

INSPECTION RESULTS

WRITTEN NOTIFICATION: Generators

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 22 (1) (b)
Generators
s. 22 (1) Subject to subsections (2) and (3), every licensee of a long-term care home shall ensure that the home is served by a generator that is available at all times and that has the capacity to maintain, in the event of a power outage,
(b) emergency lighting in hallways, corridors, stairways and exits; and

The licensee has failed to ensure that the emergency lighting in a hallway in the home and an exit, located in a section called Team 1, was served, and maintained by the generator during an incident of a power outage, the city in which the long-term care home was situated experienced wide-spread power outages. Failure to ensure that emergency lighting in all hallways and exits were maintained during a power failure poses gaps in the care and services afforded to the residents.

Sources: the licensee's policy entitled "Loss of Electrical Power", interviews with the Executive Director, Maintenance Manager and other staff.

WRITTEN NOTIFICATION: Generators

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 22 (1) (c)
Generators
s. 22 (1) Subject to subsections (2) and (3), every licensee of a long-term care home shall ensure that the home is served by a generator that is available at all times and that has the capacity to maintain, in the event of a power outage,
(c) essential services, including dietary services equipment required to store food at safe temperatures and prepare and deliver meals and snacks, equipment required to store drugs at safe temperatures and to prepare and deliver drugs, the resident-staff communication and response system, elevators and life support, safety and emergency equipment. O. Reg. 246/22, s. 22 (1); O. Reg. 66/23, s. 2.

The licensee has failed to ensure that a suctioning device for the Hungry Hollow main dining area was capable to be served by a generator during an incident of a power outage, the city in which the long-term care home was situated experienced wide-spread power outages. Failure to ensure that an oral suctioning device was serviced at the main dining area poses gaps in emergent care and services for residents.

Sources: the licensee's policy entitled "Loss of Electrical Power", interviews with the Executive Director, Director of Care and other staff.

WRITTEN NOTIFICATION: Air temperature

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 24 (3)
Air temperature
s. 24 (3) The temperature required to be measured under subsection (2) shall be documented at least once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night.

The licensee has failed to document in writing at least once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night the air temperatures measured in the home. Failure to document air temperature measurements impacts assurance that the home maintained at a minimum temperature of 22 degrees Celsius.

Sources: daily air temperatures form and interview with the Executive Director.

WRITTEN NOTIFICATION: Emergency plans

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 268 (4) 1. ix.
Emergency plans
s. 268 (4) The licensee shall ensure that the emergency plans provide for the following:
1. Dealing with emergencies, including, without being limited to,
ix. loss of one or more essential services,

The licensee has failed to comply with their written emergency plan during an incident of a power failure and loss of telecommunication. In accordance with O. Reg 246/22, s. 11 (1) (b), the licensee is required to ensure that written plans developed for the loss of essential services were complied with. Specifically, the licensee's emergency plans indicated that stored flashlights and batteries were to be located and delivered to staff as needed and that a battery-operated cellular

phone were to be available, such as a "charge nurse" cellular phone, which were not all available at the time. Failure to ensure emergency plans were complied impacts the operation of the home and the home's response to minimize risk to resident safety.

Sources: the licensee's policy entitled "Loss of Communication Services", licensee's policy entitled "Loss of Electrical Power", interviews with Executive Director, Director of Care and other staff.

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