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

Sudbury Service Area Office
159 Cedar Street, Suite 403
Sudbury ON P3E 6A5
Telephone: 1-800-663-6965
SudburySAO.moh@ontario.ca

Original Public Report

Report Issue Date September 2, 2022
Inspection Number 2022_1589_0002
Inspection Type
☒ Critical Incident System ☐ Complaint ☒ Follow-Up ☐ Director Order Follow-up
☐ Proactive Inspection ☐ SAO Initiated ☐ Post-occupancy
☐ Other _____

Licensee
Corporation of the County of Simcoe

Long-Term Care Home and City
Trillium Manor Home for the Aged, Orillia

Lead Inspector
Tracy Muchmaker #690

Additional Inspector(s)
Vernon Abellera #741751

Inspector Digital Signature
Tracy L Muchmaker
Digitally signed by Tracy L Muchmaker
Date: 2022.09.07 16:04:12 -04'00'

INSPECTION SUMMARY

The inspection occurred on the following date(s): August 22-26, 2022

The following intake(s) were inspected:

- One intake, related to an unexpected death;
- One intake, related to a missing resident;
- One intake, which was Follow up related to Compliance Order (CO) #001, related to LTCHA 2007, s.19 (1), Duty to protect.

Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance.

Legislative Reference		Inspection #	Order #	Inspector (ID) who complied the order
LTCHA, 2007	s. 19	2022_1589_0001	CO#001	#690

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

- Infection Prevention and Control (IPAC)
- Prevention of Abuse and Neglect
- Responsive Behaviours
- Safe and Secure Home

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INSPECTION RESULTS

WRITTEN NOTIFICATION DOORS IN A HOME

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

Non-compliance with: O. Reg. 246/22 *s.* 12 (1) (i)

The licensee has failed to ensure that all doors leading to stairways and the outside of the home other than doors leading to secure outside areas that preclude exit by a resident, including balconies and terraces, or doors that residents do not have access were kept closed and locked.

Rationale and Summary

1. An incident occurred involving a resident that resulted in minor injuries to the resident.

During an observation on the first day of the inspection, a door leading to a patio in a resident area was found to be unlocked and unsupervised. The gate to the patio leading to the parking lot at the back of the building was also open.

A PSW and the Administrator both verified that the doors leading to that patio were supposed to be locked, unless a family member was visiting a resident on the patio. They further stated that likely a family had been visiting on the previous weekend, and staff had forgotten to lock the door afterwards. The Administrator stated that staff were supposed to be completing a daily check on the doors, and it had not been done as staff were not aware that they were to be completing the door checks.

Sources: A Resident's progress notes; observations of the patio doors; interviews with a PSW, other staff, and the Administrator.

2. During further observations of the same unit, the Inspectors found a door leading to a patio at the front of the building to be unlocked and unsupervised.

The Administrator stated that the door to the patio in front of the building had been unlocked in order to allow residents to go outside, and they had thought that the patio was secure because it had a fence around it. The Administrator further stated that going forward, the doors to the patio was to be locked at all times unless supervised by the staff.

Sources: A resident's progress notes, observations of the patio doors; The home's Policy titled: Security and locking doors-LTCSS HS-55, effective date March 2020; Interview with the Administrator.

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