

**Ministry of Long-Term Care**

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

**London District**

130 Dufferin Avenue, 4th Floor  
London, ON, N6A 5R2  
Telephone: (800) 663-3775

## Original Public Report

**Report Issue Date:** October 7, 2024

**Inspection Number:** 2024-1059-0005

**Inspection Type:**

Critical Incident

**Licensee:** S & R Nursing Homes Ltd.

**Long Term Care Home and City:** Trillium Villa Nursing Home, Sarnia

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): October 2-4, 2024

The following intake(s) were inspected:

- Intake: #00123310 / Critical Incident (CI) #2217-000026-24 related to falls prevention and management
- Intake: #00123881 / CI #2217-000028-24 related to infection prevention and control

Inspection Manager was also present during the inspection.

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

- Skin and Wound Prevention and Management
- Infection Prevention and Control
- Falls Prevention and Management

## INSPECTION RESULTS

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**WRITTEN NOTIFICATION: Infection prevention and control  
program**

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.

The licensee has failed to ensure that the staff participated in the implementation of the Infection Prevention and Control Program (IPAC) in accordance with the IPAC Standard for Long-Term Care Homes.

The IPAC Standard for Long-Term Care Homes was issued by the Director on April 2022 and revised on September 2023.

As per section 10.4 (h) of IPAC Standard for Long-Term Care Homes: Support be provided for residents to perform hand hygiene prior to receiving meals and snacks, and after toileting.

As per section 10.4 (i) of IPAC Standard for Long-Term Care Homes: Support be provided for residents who have difficulty completing hand hygiene due to mobility, cognitive or other impairments.

O. Reg. 246/22, s. 102 (2)(b) required the licensee to implement any standard or protocol issued by the Director with respect to infection prevention and control.

**Rationale and Summary:**

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During observations of a lunch service, the residents were not supported with hand hygiene prior to their meal services, which included residents that came through the hallway. Personal Support Worker (PSW) stated that they do not support residents with hand hygiene prior to their meals.

During an observation of a snack services, a PSW provided snack services to residents without supporting hand hygiene prior.

The Infection Prevention and Control (IPAC) Lead acknowledged in an interview that the expectation was to provide support for residents with hand hygiene before meals and snack services.

The home's Hand Hygiene Policy stated that all residents be provided or offered assistance with hand hygiene before and after all meals and snacks.

Staff, not implementing the home's IPAC program by not providing hand hygiene to residents prior to their meal and snack service, increases the risk of potentially spreading healthcare-associated infections.

**Sources:**

Staff interviews, Hand Hygiene Policy, dining and snack services observations, IPAC Observations.