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 West District
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Original Public Report

Report Issue Date: April 4, 2024	
Inspection Number: 2024-1094-0001	
Inspection Type: Critical Incident	
Licensee: Lutheran Homes Kitchener-Waterloo	
Long Term Care Home and City: Trinity Village Care Centre, Kitchener	
Lead Inspector Janis Shkilnyk (706119)	**Inspector Digital Signature** Janis M Shkilnyk Digitally signed by Janis M Shkilnyk Date: 2024.04.04 11:00:30 -04'00'
Additional Inspector(s)	

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 19-21, 2024

The following intake(s) were inspected:

- Intake: #00109275 - related to a disease outbreak

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

Medication Management
Infection Prevention and Control

INSPECTION RESULTS

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. O. Reg. 246/22, s. 102 (2).

The licensee has failed to ensure the additional requirements under "Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes, revised September 2023 were followed.

Specifically, additional requirement 9.1 under the IPAC Standard states that the licensee shall ensure that hand hygiene, including, but not limited to, at the four moments of hand hygiene (before initial resident environment contact; before any aseptic procedure; after body fluid exposure risk, and after resident environment contact) are followed.

Rationale and Summary

The home's policy, Hand Hygiene Program stated staff were to perform hand hygiene before and after contact with any resident, when their body substances or items were contaminated by them, after handling dirty dishes, before contacting the face and mouth of a resident, and after touching any areas.

Inspector 706119 observed multiple staff members assisting residents during

different meal services. They were assisting residents with a variety of tasks, contaminating their hands, and did not perform hand hygiene between these interactions.

The staff member stated that they were not aware that hand hygiene should be performed in the dining room between clearing dishes, touching contaminated surfaces and resident interaction.

The Infection Prevention and Control (IPAC) Lead stated that hand hygiene is to be performed by staff in the dining room at the four hand hygiene moments.

There was potential risk to residents when staff did not perform hand hygiene which could have let to the spread of potentially harmful pathogens and infection in residents.

Sources:

observations, Interviews with staff.

[706119]