

Ministry of Long-Term Care

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

Ottawa District

347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Public Report

Report Issue Date: February 19, 2025

Inspection Number: 2025-1019-0001

Inspection Type:

Proactive Compliance Inspection

Licensee: 0760444 B.C. Ltd. as General Partner on behalf of Omni Health Care Limited Partnership

Long Term Care Home and City: West Lake Terrace, Picton

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): February 10-12, 14, 18-19, 2025

The inspection occurred offsite on the following date(s): February 13, 2025

The following intake(s) were inspected:

- Intake: #00139097 - PCI

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

Food, Nutrition and Hydration
Medication Management
Safe and Secure Home
Quality Improvement
Pain Management
Resident Care and Support Services
Skin and Wound Prevention and Management
Housekeeping, Laundry and Maintenance Services
Residents' and Family Councils

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Infection Prevention and Control
Prevention of Abuse and Neglect
Staffing, Training and Care Standards
Residents' Rights and Choices

INSPECTION RESULTS

WRITTEN NOTIFICATION: Retraining

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

Non-compliance with: FLTCA, 2021, s. 82 (4)

Training

s. 82 (4) Every licensee shall ensure that the persons who have received training under subsection (2) receive retraining in the areas mentioned in that subsection at times or at intervals provided for in the regulations.

The licensee has failed to ensure that all staff who provide direct care to residents receive annual training as required in O. Reg 246/22 s. 260 (1).

Specifically training in infection prevention and control (IPAC) must include: modes of infection transmission; signs and symptoms of infectious diseases; what to do if experiencing symptoms of infectious disease; cleaning and disinfection practices; and handling and disposing of biological and clinical waste including used personal protective equipment.

The licensee did not provide a registered staff member with the above listed IPAC training in 2024.

Sources: Registered staff member's education records, and an interview with the

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Administrator.

WRITTEN NOTIFICATION: Skin and Wound Care

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (iv)

Skin and wound care

s. 55 (2) Every licensee of a long-term care home shall ensure that,

(b) a resident exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds,

(iv) is reassessed at least weekly by an authorized person described in subsection (2.1), if clinically indicated;

The licensee has failed to ensure that a resident who exhibited altered skin integrity, was not reassessed weekly over specific weeks from December 2024 to February 2025.

Sources: Resident's weekly skin and wound evaluations on Point Click Care and interviews with a registered staff member and the DOC.

WRITTEN NOTIFICATION: Infection prevention and control program

NC #003 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).

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The licensee has failed to ensure that a standard issued by the Director with respect to infection prevention and control was complied with. In accordance with additional requirement 10.2 (c) under the Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes (April, 2022), the licensee has failed to ensure that residents were assisted to perform hand hygiene before lunch in the dining room.

Sources: Inspector's observations on a day in February, 2025, and an interview with a staff member.