

Ministry of Long-Term Care

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

North District

159 Cedar St, Suite 403
Sudbury, ON, P3E 6A5
Telephone: (800) 663-6965

Original Public Report

Report Issue Date: November 19, 2024
Inspection Number: 2024-1614-0002
Inspection Type: Critical Incident Follow up
Licensee: Corporation of the Town of Kirkland Lake
Long Term Care Home and City: Teck Pioneer Residence, Kirkland Lake

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): November 4,-7, 2024

The following intake(s) were inspected:

- One Intake related to a resident fall;
- One Intake related to a disease outbreak;
- One Intake related to Follow-up to compliance order #001 issued for FLTCA, 2021 - s. 5 -related to safe and secure home;
- One Intake related to Follow-up to compliance order #002 issued for O. Reg. 246/22 - s. 40 -related to transferring and positioning techniques;
- One Intake related to Follow-up to compliance order #003 issued for FLTCA, 2021 - s. 23 (4) - related to infection prevention and control;
- One Intake related to Follow-up to compliance order #004 issued for O. Reg. 246/22 - s. 115 -related to critical incident reporting;
- One Intake related to Follow-up to compliance order #005 issued for O. Reg. 246/22 - s. 123 (2) -related to medication management system; and
- One Intake related to Follow-up to compliance order #006 issued for O. Reg. 246/22 - s. 140 (2) -related to medication administration.

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Previously Issued Compliance Order(s)

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

Order #002 from Inspection #2024-1614-0001 related to O. Reg. 246/22, s. 40.

The following previously issued Compliance Order(s) were found **NOT** to be in compliance:

Order #004 from Inspection #2024-1614-0001 related to O. Reg. 246/22, s. 115.

Order #003 from Inspection #2024-1614-0001 related to FLTCA, 2021, s. 23 (4).

Order #006 from Inspection #2024-1614-0001 related to O. Reg. 246/22, s. 140 (2).

Order #005 from Inspection #2024-1614-0001 related to O. Reg. 246/22, s. 123 (2).

The following previously issued Compliance Order(s) were closed:

Order #001 from Inspection #2024-1614-0001 related to FLTCA, 2021, s. 5.

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

- Resident Care and Support Services
- Medication Management
- Infection Prevention and Control
- Safe and Secure Home
- Reporting and Complaints
- Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Conditions of License

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

Non-compliance with: FLTCA, 2021, s. 104 (4)

Conditions of license

s. 104 (4) Every licensee shall comply with the conditions to which the license is subject.

CO #003 from inspection #2024-1614-0001 issued on August 6, 2024, with a compliance due date of October 28, 2024, related to O. Reg. 246/22 s. 23 (4) was not complied with.

The following components of the order were not complied;

b) Develop and implement a documented plan to ensure that the IPAC Program in the home complies with the requirements as set out in the Act, its Regulations, and the IPAC Standards for LTCHs. This plan must include, but is not limited to:

The development of a written job description for the IPAC Lead outlining their requires responsibilities;

-how the IPAC Lead will carry out their required responsibilities;

-the development of a process for ensuring alcohol-based hand rub and cleaning and disinfecting products used in the home are not expired;

-the development of a process for ensuring additional precautions include clear point-of-care signage indicating enhanced IPAC measures are in place; and

-the development of a process for annual review, and updates as necessary, of the IPAC program's policies and procedures.

The documented plan must include processes by which the plan will be implemented, and the person/s responsible for ensuring the implementation of the plan.

c) Develop and implement an auditing method to ensure that the processes established by the home, are being implemented as outlined in the plan. The audits must be conducted monthly and continued for at least two months post compliance

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due date. A record of the audits must be maintained.

The licensee failed to ensure that the documented plan specified processes detailing how and by whom, the plan would be implemented and that an auditing method to support the processes was developed and implemented.

An Administrative Monetary Penalty (AMP) is being issued on this written notification AMP #001

NOTICE OF ADMINISTRATIVE MONETARY PENALTY (AMP)

The Licensee has failed to comply with FLTCA, 2021

Notice of Administrative Monetary Penalty AMP #001

Related to Written Notification NC #001

Pursuant to section 158 of the Fixing Long-Term Care Act, 2021, the licensee is required to pay an administrative penalty of \$1100.00, to be paid within 30 days from the date of the invoice.

In accordance with s. 349 (6) and (7) of O. Reg. 246/22, this administrative penalty is being issued for the licensee's failure to comply with an order under s. 155 of the Act.

Compliance History:

Prior NC with FLTCA, 2021, s. 23 (4), resulting in CO #003 in inspection #2024-1614-0001, issued on August 6, 2024.

This is the first AMP that has been issued to the licensee for failing to comply with this requirement.

Invoice with payment information will be provided under a separate mailing after service of this notice.

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Licensees must not pay an AMP from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the AMP.

WRITTEN NOTIFICATION: Conditions of License

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

Non-compliance with: FLTCA, 2021, s. 104 (4)

Conditions of license

s. 104 (4) Every licensee shall comply with the conditions to which the license is subject.

CO #004 from inspection #2024-1614-0001 issued on August 6, 2024, with a compliance due date of October 28, 2024, related to O. Reg. 246/22 s. 115 was not complied with.

The following components of the order were not complied;

3) Educate all registered staff, including a member of the management and leadership team, on the updated policy and process for critical incident reporting. Records of the education must be kept, including dates and names of persons who attended..

The licensee failed to provide education to staff and management team on critical incident reporting.

An Administrative Monetary Penalty (AMP) is being issued on this written notification AMP #002

NOTICE OF ADMINISTRATIVE MONETARY PENALTY (AMP)

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The Licensee has failed to comply with FLTCA, 2021

**Notice of Administrative Monetary Penalty AMP #002
Related to Written Notification NC #002**

Pursuant to section 158 of the Fixing Long-Term Care Act, 2021, the licensee is required to pay an administrative penalty of \$1100.00, to be paid within 30 days from the date of the invoice.

In accordance with s. 349 (6) and (7) of O. Reg. 246/22, this administrative penalty is being issued for the licensee's failure to comply with an order under s. 155 of the Act.

Compliance History:

Prior NC with O. Reg. 246/22, s. 115, resulting in CO #004 in inspection #2024-1614-0001, issued on August 6, 2024.

This is the first AMP that has been issued to the licensee for failing to comply with this requirement.

Invoice with payment information will be provided under a separate mailing after service of this notice.

Licensees must not pay an AMP from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the AMP.

WRITTEN NOTIFICATION: Conditions of License

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

Non-compliance with: FLTCA, 2021, s. 104 (4)

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Conditions of license

s. 104 (4) Every licensee shall comply with the conditions to which the license is subject.

CO #005 from Inspection #2024-1614-0001, issued on August 8, 2024, with a compliance due date of October 28, 2024, related to O. Reg. 246/22 s. 123 (2) was not complied with.

The following components of the order were not complied:

3) Educate all staff who administer oxygen therapy and manage oxygen therapy delivery devices on the process developed in step 2.

The licensee has failed to educate all staff who administered oxygen therapy and managed oxygen therapy delivery devices on the process developed as several PSWs and not all registered staff completed the training.

Sources: Interview with Educator and DOC; record review of staff sign in sheet for O2 training.

This Written Notification is being referred to the Director for further action by the Director.

An Administrative Monetary Penalty (AMP) is being issued on this written notification AMP #003

NOTICE OF ADMINISTRATIVE MONETARY PENALTY (AMP)

The Licensee has failed to comply with FLTCA, 2021

Notice of Administrative Monetary Penalty AMP #003

Related to Written Notification NC #003

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Pursuant to section 158 of the Fixing Long-Term Care Act, 2021, the licensee is required to pay an administrative penalty of \$1100.00, to be paid within 30 days from the date of the invoice.

In accordance with s. 349 (6) and (7) of O. Reg. 246/22, this administrative penalty is being issued for the licensee's failure to comply with an order under s. 155 of the Act.

Compliance History:

Prior NC with O. Reg. 246/22, s. 123 (2), resulting in CO #005 in inspection #2024-1614-0001, issued on August 6, 2024.

This is the first AMP that has been issued to the licensee for failing to comply with this requirement.

Invoice with payment information will be provided under a separate mailing after service of this notice.

Licensees must not pay an AMP from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the AMP.

WRITTEN NOTIFICATION: Conditions of License

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 104 (4)

Conditions of license

s. 104 (4) Every licensee shall comply with the conditions to which the license is subject.

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CO #006 from inspection 2024-1614-0001, issued on August 8, 2024, with a compliance due date of October 28, 2024, related to O. Reg 246/22 section 140 (2) was not complied with.

The following components of the order were not complied with:

2) Re-train all registered staff on the licensee's policies as reviewed in step 1, including who, when, and how to process and transcribe an order, specifically an order for oxygen with a range of administration doses, and the requirement to follow medical orders exactly as prescribed.

The licensee has failed to ensure that registered staff were re-trained on the licensee's policies for transcribing oxygen orders as identified in step one.

Sources: Interviews with DOC and Educator.

An Administrative Monetary Penalty (AMP) is being issued on this written notification AMP #004

NOTICE OF ADMINISTRATIVE MONETARY PENALTY (AMP)

The Licensee has failed to comply with FLTCA, 2021

Notice of Administrative Monetary Penalty AMP #004

Related to Written Notification NC #004

Pursuant to section 158 of the Fixing Long-Term Care Act, 2021, the licensee is required to pay an administrative penalty of \$1100.00, to be paid within 30 days from the date of the invoice.

In accordance with s. 349 (6) and (7) of O. Reg. 246/22, this administrative penalty is being issued for the licensee's failure to comply with an order under s. 155 of the Act.

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Compliance History:

Prior NC with O. Reg. 246/22, s. 140 (2), resulting in CO #006 in inspection #2024-1614-0001, issued on August 6, 2024.

This is the first AMP that has been issued to the licensee for failing to comply with this requirement.

Invoice with payment information will be provided under a separate mailing after service of this notice.

Licensees must not pay an AMP from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the AMP.

WRITTEN NOTIFICATION: Reports re-critical incidents

NC #005 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 115 (1) 5.

Reports re critical incidents

s. 115 (1) Every licensee of a long-term care home shall ensure that the Director is immediately informed, in as much detail as is possible in the circumstances, of each of the following incidents in the home, followed by the report required under subsection (5):

5. An outbreak of a disease of public health significance or communicable disease as defined in the Health Protection and Promotion Act.

The licensee has failed to ensure that the Director was immediately informed of an COVID-19 outbreak, by reporting the outbreak six days after it was declared by the Public Health Unit.

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Sources: CI(Critical Incident) report, interview with Restorative Care Coordinator.