

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

Public Report

Report Issue Date: June 17, 2025

Inspection Number: 2025-1614-0001

Inspection Type:

Proactive Compliance Inspection

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): June 9, 10, 11, 12, 2025

The following intake(s) were inspected:

- Intake: #00149057 - Proactive Compliance Inspection

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

- Resident Care and Support Services
- Skin and Wound Prevention and Management
- Medication Management
- Food, Nutrition and Hydration
- Residents' and Family Councils
- Safe and Secure Home
- Infection Prevention and Control
- Prevention of Abuse and Neglect
- Staffing, Training and Care Standards
- Quality Improvement
- Residents' Rights and Choices
- Pain Management

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

INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: FLTCA, 2021, s. 85 (3) (c)

Posting of information

s. 85 (3) The required information for the purposes of subsections (1) and (2) is,
(c) the long-term care home's policy to promote zero tolerance of abuse and neglect of residents;

The licensee has failed to ensure that their Prevention of Abuse and Neglect policy is posted in the home. The home did post this policy prior to the inspectors leaving the home.

Source: Inspectors observations and interview with Administrator.

Date Remedy Implemented: June 10, 2025

NC #002 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: O. Reg. 246/22, s. 265 (1) 10.

Posting of information

s. 265 (1) For the purposes of clause 85 (3) (s) of the Act, every licensee of a long-term care home shall ensure that the information required to be posted in the home

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

and communicated to residents under section 85 of the Act includes the following:

10. The current version of the visitor policy made under section 267.

The licensee has failed to ensure that the visitor policy was posted in the home but did post it in the home prior to the inspectors leaving the home.

Sources: Inspector observations and interview with Administrator.

Date Remedy Implemented: June 10, 2025

**WRITTEN NOTIFICATION: Resident and Family/Caregiver
Experience Survey- Did not seek advice**

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

Non-compliance with: FLTCA, 2021, s. 43 (4)

Resident and Family/Caregiver Experience Survey

s. 43 (4) The licensee shall seek the advice of the Residents' Council and the Family Council, if any, in carrying out the survey and in acting on its results.

The licensee has failed to seek the advice of the Residents' Council in acting on the results of the Resident and Family/Caregiver Experience Survey. One of the representatives of the Residents' Council confirmed that the home did not review, and seek the advice of the council in acting on the survey results.

Sources: record review of Resident Council meeting minutes, and an interview with a member of Resident Council.

WRITTEN NOTIFICATION: Air Temperatures

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

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

Non-compliance with: O. Reg. 246/22, s. 24 (1)

Air temperature

s. 24 (1) Every licensee of a long-term care home shall ensure that the home is maintained at a minimum temperature of 22 degrees Celsius.

The licensee has failed to ensure that the air temperature of the home is maintained at a minimum of 22 degrees Celsius. Specifically, the air temperatures measured in resident rooms in May 2025, identified there were 14 instances where the temperature was below 22 degrees Celsius (range of 19.4-21.1). Air temperatures measured in June 2025 in resident rooms, identified there were 25 rooms where the temperature was below 22 degrees Celsius (range below-16.8-21.1). Other daily temperatures of rooms were not completed

Sources: Inspector observations, interview with an RN and the Maintenance Manager.

WRITTEN NOTIFICATION: Air Temperatures

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

Non-compliance with: O. Reg. 246/22, s. 24 (3)

Air temperature

s. 24 (3) The temperature required to be measured under subsection (2) shall be documented at least once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night.

The licensee has failed to ensure that air temperatures were measured and documented at least once every afternoon between 1200 hours and 1500 hours and once every evening or night. Specifically, the licensee had not measured and

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

documented air temperatures in the resident rooms or common areas during the afternoon between 1200 hours and 1500 hours and once every evening or night.

Sources-Homes air temperature logs, interview with an RN and the Maintenance manager.

WRITTEN NOTIFICATION: General Requirements

NC #006 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 34 (1) 1.

General requirements

s. 34 (1) Every licensee of a long-term care home shall ensure that the following is complied with in respect of each of the organized programs required under sections 11 to 20 of the Act and each of the interdisciplinary programs required under section 53 of this Regulation:

1. There must be a written description of the program that includes its goals and objectives and relevant policies, procedures and protocols and provides for methods to reduce risk and monitor outcomes, including protocols for the referral of residents to specialized resources where required.

The licensee has failed to ensure that their hydration program policy included protocols for referring residents to specialized resources, such as the Registered Dietitian, where required.

Sources: Homes hydration policy, Interviews with an RPN, the Registered Dietitian, Dietary Manager and the Administrator.

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

WRITTEN NOTIFICATION: General Requirements

NC #007 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 34 (1) 3.

General requirements

s. 34 (1) Every licensee of a long-term care home shall ensure that the following is complied with in respect of each of the organized programs required under sections 11 to 20 of the Act and each of the interdisciplinary programs required under section 53 of this Regulation:

3. The program must be evaluated and updated at least annually in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices.

The licensee has failed to ensure that their Hydration Program policy be reviewed and updated on an annual basis. Specifically, their Hydration Program policy was last reviewed and updated in May 2020.

Sources: Homes hydration program policy and interview with Administrator.

WRITTEN NOTIFICATION: Continuous quality improvement committee

NC #008 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 166 (2) 7.

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

Continuous quality improvement committee

s. 166 (2) The continuous quality improvement committee shall be composed of at least the following persons:

7. At least one employee of the licensee who is a member of the regular nursing staff of the home.

The licensee has failed to ensure that their Continuous Quality Improvement committee included a member of the regular nursing staff.

During an interview on a specified date in June 2025, the Quality Improvement Lead acknowledged and confirmed that a regular nursing staff member was not part of their Quality Improvement committee.

Sources: CQI lead interview. Quality Improvement committee minutes.

WRITTEN NOTIFICATION: Continuous quality improvement committee

NC #009 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 166 (2) 8.

Continuous quality improvement committee

s. 166 (2) The continuous quality improvement committee shall be composed of at least the following persons:

8. At least one employee of the licensee who has been hired as a personal support worker or provides personal support services at the home and meets the qualification of personal support workers referred to in section 52.

The licensee has failed to ensure that their Continuous Quality Improvement

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

committee included a Personal Support Worker staff member.

During an interview on a specified date in June 2025, the Quality Improvement Lead acknowledged and confirmed that a Personal Support Worker was not part of their Quality Improvement committee.

Sources: CQI lead interview. Quality Improvement committee minutes.

WRITTEN NOTIFICATION: Continuous quality improvement committee

NC #010 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 166 (2) 9.

Continuous quality improvement committee

s. 166 (2) The continuous quality improvement committee shall be composed of at least the following persons:

9. One member of the home's Residents' Council.

The licensee has failed to ensure that their Continuous Quality Improvement (CQI) committee included one member of the home's Residents' Council.

During an interview on a specified date in June 2025, the Quality Improvement Lead acknowledged and confirmed that a Resident Council member was not part of their CQI committee.

Sources: CQI lead interview, Quality improvement committee minutes

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

WRITTEN NOTIFICATION: Continuous quality improvement initiative report

NC #011 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 168 (3)

Continuous quality improvement initiative report

s. 168 (3) The licensee shall ensure that a copy of the report is provided to the Residents' Council and Family Council, if any.

The licensee has failed to ensure that a copy of their annual Continuous quality improvement initiative report was provided to the Resident Council .

On a specified date in June 2025 , the Quality Improvement lead indicated that Resident's Council had not been provided an annual copy of this report.

Sources: interviews with a Resident council member and Quality Improvement Lead.

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