

**Inspection Report under
the Long-Term Care
Homes Act, 2007**

**Rapport d'inspection en vertu de
la Loi de 2007 sur les foyers de
soins de longue durée**

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

**Division des opérations relatives aux
soins de longue durée
Inspection de soins de longue durée**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Feb 26, 2021	2021_520622_0005	000787-21	Follow up

Licensee/Titulaire de permis

Kemptville District Hospital
2675 Concession Road P.O. Bag 2007 Kemptville ON K0G 1J0

Long-Term Care Home/Foyer de soins de longue durée

Kemptville District Hospital
2675 Concession Road P.O. Bag 2007 Kemptville ON K0G 1J0

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs

HEATH HEFFERNAN (622)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): February 24, 25, 2021

The following intake was completed during this follow up inspection:

Intake log #000787-21 - Follow up to Compliance Order #001 related to Retraining - s. 76 (4). of the Long-Term Care Homes Act (LTCHA) - which was issued under inspection # 2020_520622_0024 on January 5, 2021 and had a compliance due date of February 16, 2021.

During the course of the inspection, the inspector(s) spoke with the VP Nursing/Clinical Services (Administrator), Manager Nursing Services (Director of Care (DOC)), a Registered Practical Nurse (RPN), Personal Support Workers (PSW)s and a housekeeper.

Also during the course of the inspection, the inspector reviewed the licensee order report, Surge Learning training records, the licensee's COVID-19 Visitor Policy dated September 17, 2020 and observed resident care and services.

**The following Inspection Protocols were used during this inspection:
Infection Prevention and Control
Prevention of Abuse, Neglect and Retaliation**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

0 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

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REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
LTCHA, 2007 S.O. 2007, c.8 s. 76. (4)	CO #001	2020_520622_0024		622

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Légende
<p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (a requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 101.
Conditions of licence**

Specifically failed to comply with the following:

Conditions of licence

s. 101. (3) It is a condition of every licence that the licensee shall comply with this Act, the Local Health System Integration Act, 2006, the Connecting Care Act, 2019, the regulations, and every directive issued, order made or agreement entered into under this Act and those Acts.

Findings/Faits saillants :

1. The licensee has failed to comply with Compliance Order (CO) #001 from Inspection #2020_520622_0024 served on January 5, 2021 with a compliance due date of February 16, 2021.

The required annual retraining for the VP Nursing/Clinical Services, the Manager of Nursing Services and the Nursing Team Lead related to the licensee's policy to promote zero tolerance of abuse and neglect of residents and the duty under section 24 to make mandatory reports had not been completed by the compliance due date of February 16, 2021. The Nursing Team Lead had not completed the annual retraining specified in CO #001 until February 25, 2021.

Sources: CO #001 from #2020_520622_0024; the home's annual Surge Learning training records; interviews with the VP Nursing/Clinical Services and other staff. [s. 101. (3)]

Issued on this 26th day of February, 2021

Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs

Original report signed by the inspector.