

Ministry of Long-Term Care

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

Central East District

33 King Street West, 4th Floor
Oshawa, ON, L1H 1A1
Telephone: (844) 231-5702

Public Report

Report Issue Date: July 14, 2025

Inspection Number: 2025-1451-0004

Inspection Type:

Critical Incident

Licensee: The Mennonite Home Association of York County

Long Term Care Home and City: Parkview Home Long-Term Care, Stouffville

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): July 8, 9, 10, 11, 14, 2025

The following intake(s) were inspected:

- An intake related to improper resident care.
- An intake related to an outbreak.

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

Resident Care and Support Services
Infection Prevention and Control

INSPECTION RESULTS

WRITTEN NOTIFICATION: Infection Prevention and Control Program

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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 failed to ensure that the Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes issued by the Director was complied with.

In accordance to Additional Requirement 10.1 under the IPAC Standard for Long Term Care Homes (April 2022, revised September 2023), the licensee is directed to ensure that the hand hygiene program includes access to hand hygiene agents, including 70-90% Alcohol-Based Hand Rub (ABHR).

The licensee failed to ensure that expired ABHR found in use was able to meet the 70% to 90% alcohol content.

ABHR was found to be expired in three areas in the home.

Sources: Observations, interviews with IPAC lead and ESM.

COMPLIANCE ORDER CO #001 Infection prevention and control program

NC #002 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 102 (9) (a)

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Infection prevention and control program

s. 102 (9) The licensee shall ensure that on every shift,

(a) symptoms indicating the presence of infection in residents are monitored in accordance with any standard or protocol issued by the Director under subsection (2); and

**The inspector is ordering the licensee to comply with a Compliance Order
[FLTCA, 2021, s. 155 (1) (a)]:**

The licensee shall:

1.The IPAC lead or designate will re-educate all Registered staff working on a specific Resident Home Area (RHA) on the requirement to complete on every shift, symptoms indicating the presence of infection in applicable residents. Keep a documented record of the date, content of the education, who provided the education and the attendees.

2.The IPAC lead, along with the nursing management team will develop and implement a plan to ensure symptomatic residents are monitored and assessed every shift. These documents will be made available to an inspector upon request.

3.Evaluate, review and update any policies, procedures, protocols and or training related to IPAC assessments, and monitoring in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices.

4.The licensee shall retain records of part 1 to 3 and these documents will be made available to an inspector upon request.

Grounds

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The licensee failed to ensure residents #005 through #014 were assessed every shift when they had symptoms that indicated the presence of infection.

The home had been declared in outbreak which affected a number of residents on a specific RHA. The clinical records for the residents were selected from the home's outbreak list and indicated that residents #005 through #014 had not received an infection monitoring assessment on all shifts to monitor their symptoms or presence of infection.

The failure to monitor residents with symptoms of infection on each shift puts residents at risk by not determining changes to resident's condition and any subsequent intervention required to support the resident's health and well-being.

Sources: CI report, residents #005 through #014's clinical records, outbreak documentation, interview with IPAC lead.

This order must be complied with by October 10, 2025

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REVIEW/APPEAL INFORMATION

TAKE NOTICE The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th floor
Toronto, ON, M7A 1N3

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e-mail: MLTC.AppealsCoordinator@ontario.ca

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

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Health Services Appeal and Review Board

Attention Registrar
151 Bloor Street West, 9th Floor
Toronto, ON, M5S 1S4

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th Floor
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e-mail: MLTC.AppealsCoordinator@ontario.ca

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website www.hsarb.on.ca.