

**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**

Central West Service Area Office  
1st Floor, 609 Kumpf Drive  
WATERLOO ON N2V 1K8  
Telephone: (888) 432-7901  
Facsimile: (519) 885-2015

Bureau régional de services de Centre Ouest  
1e étage, 609 rue Kumpf  
WATERLOO ON N2V 1K8  
Téléphone: (888) 432-7901  
Télécopieur: (519) 885-2015

**Public Copy/Copie du rapport public**

| <b>Report Date(s) /<br/>Date(s) du Rapport</b> | <b>Inspection No /<br/>No de l'inspection</b> | <b>Log # /<br/>No de registre</b> | <b>Type of Inspection /<br/>Genre d'inspection</b> |
|--|---|-----------------------------------|--|
| Mar 25, 2021                                   | 2021_826606_0008                              | 003169-21                         | Other  |

**Licensee/Titulaire de permis**

Corporation of the County of Wellington  
74 Woolwich Street Guelph ON N1H 3T9

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

Wellington Terrace Long-Term Care Home  
474 Charles Allan Way Fergus ON N1M 0A1

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

JANET GROUX (606)

**Inspection Summary/Résumé de l'inspection**

**The purpose of this inspection was to conduct an Other inspection.**

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

**The following intake was completed in this Other Inspection:  
Log # 003169-21 related to COVID-19 surveillance testing requirements.**

**During the course of the inspection, the inspector(s) spoke with the Assistant Administrator (AA), Infection and Prevention Lead, Registered Nurses (RN), Personal Support Workers (PSW), and the Wellington Dufferin Public Health (PH) Unit.**

**The Inspector also observed the Home's infection control practices, policies, and other relevant documents.**

**The following Inspection Protocols were used during this inspection:  
Infection Prevention and Control**

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

**1 WN(s)  
0 VPC(s)  
1 CO(s)  
0 DR(s)  
0 WAO(s)**

**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**
**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**
**Legend**

WN – Written Notification  
 VPC – Voluntary Plan of Correction  
 DR – Director Referral  
 CO – Compliance Order  
 WAO – Work and Activity Order

**Légende**

WN – Avis écrit  
 VPC – Plan de redressement volontaire  
 DR – Aiguillage au directeur  
 CO – Ordre de conformité  
 WAO – Ordres : travaux et activités

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).

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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).

Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 174.1 Directives by Minister**

**Specifically failed to comply with the following:**

**s. 174.1 (3) Every licensee of a long-term care home shall carry out every operational or policy directive that applies to the long-term care home. 2017, c. 25, Sched. 5, s. 49.**

**Findings/Faits saillants :**

1. The Licensee has failed to ensure that every operational or policy directive that applies to the long-term care home was complied with in relation to staff COVID-19 testing requirements.

On March 17, 2020, the Premier of Ontario and Cabinet issued a COVID-19 emergency in the Province of Ontario under the Emergency Management and Civil Protection Act. On March 22 and 30, 2020, Directive #3 was issued and revised on December 7, 2020, to all Long-Term Care Homes (LTC Homes) under the Long-Term Care Homes Act (LTCHA), 2007, under section 77.7 of the Health Protection and Promotion Act (HPPA) R.S.O. 1990, c H.7. by the Chief Medical Officer of Health (CMOH) of Ontario. The CMOH advised that residents of LTC Homes were at immediate and increased risk of COVID-19 and an urgent requirement was made for all LTC Homes to implement measures to protect all residents and staff. Directive #3, dated December 7, 2020, required long-term care home licensees to conduct frequent COVID-19 testing of staff.

The Minister's directive, COVID-19: Long-term care home surveillance testing and access to homes, dated February 16, 2021, stated that staff working in a long-term care home that is not in outbreak and is in a red zone between the dates of February 16 and 27, 2021, must be tested in one of the following three ways:

- a) an antigen test three times within a seven day period, on non-consecutive days.
- b) one polymerase chain reaction (PCR) test taken every seven days or as close as can be practically achieved.
- c) one PCR test and one antigen test within a seven day period.

A staff member worked in the home between February 16-27, 2021 without being tested for COVID-19. The home was considered to be in red zone and not in outbreak at that time. This was acknowledged by the Assistant Administrator.

The licensee not ensuring that all staff members were tested for COVID-19 according to operational or policy directives issued by the Minister increased the risk of infectious disease transmission to all residents, health care providers, and visitors of the Home.

Sources: Minister's Directive #3 dated February 16, 2021, the Home's staff schedule, record of staff testing, and interview with Assistant Administrator. [s. 174.1 (3)]



Ministry of Long-Term  
Care

Inspection Report under  
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Ministère des Soins de longue  
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la Loi de 2007 sur les foyers de  
soins de longue durée

***Additional Required Actions:***

***CO # - 001 will be served on the licensee. Refer to the “Order(s) of the Inspector”.***

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Issued on this 12th day of April, 2021

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

**Original report signed by the inspector.**



**Ministry of Long-Term  
Care**

**Order(s) of the Inspector**

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

**Ministère des Soins de longue  
durée**

**Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

**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**

**Public Copy/Copie du rapport public**

**Name of Inspector (ID #) /**

**Nom de l'inspecteur (No) :** JANET GROUX (606)

**Inspection No. /**

**No de l'inspection :** 2021\_826606\_0008

**Log No. /**

**No de registre :** 003169-21

**Type of Inspection /**

**Genre d'inspection:** Other

**Report Date(s) /**

**Date(s) du Rapport :** Mar 25, 2021

**Licensee /**

**Titulaire de permis :**

Corporation of the County of Wellington  
74 Woolwich Street, Guelph, ON, N1H-3T9

**LTC Home /**

**Foyer de SLD :**

Wellington Terrace Long-Term Care Home  
474 Charles Allan Way, Fergus, ON, N1M-0A1

**Name of Administrator /**

**Nom de l'administratrice  
ou de l'administrateur :**

Suzanne Dronick

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To Corporation of the County of Wellington, you are hereby required to comply with the following order(s) by the date(s) set out below:

**Order(s) of the Inspector****Ordre(s) de l'inspecteur**

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

**Order # /**  
**No d'ordre :** 001

**Order Type /**  
**Genre d'ordre :** Compliance Orders, s. 153. (1) (a)

**Pursuant to / Aux termes de :**

LTCHA, 2007 S.O. 2007, c.8, s. 174.1 (3) Every licensee of a long-term care home shall carry out every operational or policy directive that applies to the long-term care home. 2017, c. 25, Sched. 5, s. 49.

**Order / Ordre :**

The licensee must be compliant with s. 174.1(3) of the LTCHA, 2007.

Specifically, the licensee must:

A) The licensee must be compliant with the updated guidance documents in relation to the Minister's Directive, specific to staff testing for COVID-19.

**Grounds / Motifs :**

1. The Licensee has failed to ensure that every operational or policy directive that applies to the long-term care home was complied with in relation to staff COVID-19 testing requirements.

On March 17, 2020, the Premier of Ontario and Cabinet issued a COVID-19 emergency in the Province of Ontario under the Emergency Management and Civil Protection Act. On March 22 and 30, 2020, Directive #3 was issued and revised on December 7, 2020, to all Long-Term Care Homes (LTC Homes) under the Long-Term Care Homes Act (LTCHA), 2007, under section 77.7 of the Health Protection and Promotion Act (HPPA) R.S.O. 1990, c H.7. by the Chief Med CMOH advised that residents of LTC Homes were at immediate and increased risk of COVID-19 and an urgent requirement was made for all LTC Homes to implement measures to protect all residents and staff. Directive #3, dated December 7, 2020, required long-term care home licensees to conduct frequent COVID-19 testing of staff.

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dates of February 16 and 27, 2021, must be tested in one of the following three ways:

- a) an antigen test three times within a seven day period, on non-consecutive days.
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- c) one PCR test and one antigen test within a seven day period.

A staff member worked in the home between February 16-27, 2021 without being tested for COVID-19. The home was considered to be in red zone and not in outbreak at that time. This was acknowledged by the Assistant Administrator.

The licensee not ensuring that all staff members were tested for COVID-19 according to operational or policy directives issued by the Minister increased the risk of infectious disease transmission to all residents, health care providers, and visitors of the Home.

Sources: Minister's Directive #3 dated February 16, 2021, the Home's staff schedule, record of staff testing, and interview with Assistant Administrator. [s. 174.1 (3)] (606)

**This order must be complied with /  
Vous devez vous conformer à cet ordre d'ici le :** Mar 29, 2021

**Order(s) of the Inspector**

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

**Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

**REVIEW/APPEAL INFORMATION****TAKE NOTICE:**

The Licensee has the right to request a review by the Director of this (these) Order(s) and to request that the Director stay this (these) Order(s) in accordance with section 163 of the Long-Term Care Homes Act, 2007.

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 was served on the Licensee.

The written request for review must include,

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

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

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Long-Term Care  
1075 Bay Street, 11th Floor  
Toronto, ON M5S 2B1  
Fax: 416-327-7603

When service is made by registered mail, it is deemed to be made on the fifth day after the day of mailing, when service is made by a commercial courier it is deemed to be made on the second business day after the day the courier receives the document, and when service is made by fax, it is deemed to be made on the first business day after the day the fax is sent. If the Licensee is not served with written notice of the Director's decision within 28 days of receipt of the Licensee's request for review, this(these) Order(s) is(are) deemed to be confirmed by the Director and the Licensee is deemed to have been served with a copy of that decision on the expiry of the 28 day period.

The Licensee has the right to appeal the Director's decision on a request for review of an Inspector's Order(s) to the Health Services Appeal and Review Board (HSARB) in accordance with section 164 of the Long-Term Care Homes Act, 2007. The 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 a hearing, the Licensee must, within 28 days of being served with the notice of the Director's decision, give a written notice of appeal to both:

**Ministry of Long-Term Care****Order(s) of the Inspector**

Pursuant to section 153 and/or section 154 of the *Long-Term Care Homes Act, 2007*, S.O. 2007, c. 8

**Ministère des Soins de longue durée****Ordre(s) de l'inspecteur**

Aux termes de l'article 153 et/ou de l'article 154 de la *Loi de 2007 sur les foyers de soins de longue durée*, L.O. 2007, chap. 8

**Health Services Appeal and Review Board and the Director**

Attention Registrar  
Health Services Appeal and Review Board  
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  
1075 Bay Street, 11th Floor  
Toronto, ON M5S 2B1  
Fax: 416-327-7603

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal process. The Licensee may learn more about the HSARB on the website [www.hsarb.on.ca](http://www.hsarb.on.ca).

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**RENSEIGNEMENTS RELATIFS AUX RÉEXAMENS DE DÉCISION ET AUX APPELS****PRENEZ AVIS :**

Le/la titulaire de permis a le droit de faire une demande de réexamen par le directeur de cet ordre ou de ces ordres, et de demander que le directeur suspende cet ordre ou ces ordres conformément à l'article 163 de la Loi de 2007 sur les foyers de soins de longue durée.

La demande au directeur doit être présentée par écrit et signifiée au directeur dans les 28 jours qui suivent la signification de l'ordre au/à la titulaire de permis.

La demande écrite doit comporter ce qui suit :

- a) les parties de l'ordre qui font l'objet de la demande de réexamen;
- b) les observations que le/la titulaire de permis souhaite que le directeur examine;
- c) l'adresse du/de la titulaire de permis aux fins de signification.

La demande de réexamen présentée par écrit doit être signifiée en personne, par courrier recommandé, par messagerie commerciale ou par télécopieur, au :

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 416-327-7603

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Quand la signification est faite par courrier recommandé, elle est réputée être faite le cinquième jour qui suit le jour de l'envoi, quand la signification est faite par messagerie commerciale, elle est réputée être faite le deuxième jour ouvrable après le jour où la messagerie reçoit le document, et lorsque la signification est faite par télécopieur, elle est réputée être faite le premier jour ouvrable qui suit le jour de l'envoi de la télécopie. Si un avis écrit de la décision du directeur n'est pas signifié au/à la titulaire de permis dans les 28 jours de la réception de la demande de réexamen présentée par le/la titulaire de permis, cet ordre ou ces ordres sont réputés être confirmés par le directeur, et le/la titulaire de permis est réputé(e) avoir reçu une copie de la décision en question à l'expiration de ce délai.

Le/la titulaire de permis a le droit d'interjeter appel devant la Commission d'appel et de révision des services de santé (CARSS) de la décision du directeur relative à une demande de réexamen d'un ordre ou des ordres d'un inspecteur ou d'une inspectrice conformément à l'article 164 de la Loi de 2007 sur les foyers de soins de longue durée. La CARSS est un tribunal autonome qui n'a pas de lien avec le ministère. Elle est créée par la loi pour examiner les questions relatives aux services de santé. Si le/la titulaire décide de faire une demande d'audience, il ou elle doit, dans les 28 jours de la signification de l'avis de la décision du directeur, donner par écrit un avis d'appel à la fois à :

la Commission d'appel et de révision des services de santé et au directeur

À l'attention du/de la registrateur(e)  
Commission d'appel et de révision  
des services de santé  
151, rue Bloor Ouest, 9e étage  
Toronto ON M5S 1S4

Directeur  
a/s du coordonnateur/de la coordonnatrice en matière  
d'appels  
Direction de l'inspection des foyers de soins de longue durée  
Ministère des Soins de longue durée  
1075, rue Bay, 11e étage  
Toronto ON M5S 2B1  
Télécopieur : 416-327-7603

À la réception de votre avis d'appel, la CARSS en accusera réception et fournira des instructions relatives au processus d'appel. Le/la titulaire de permis peut en savoir davantage sur la CARSS sur le site Web [www.hsb.on.ca](http://www.hsb.on.ca).

**Issued on this 25th day of March, 2021**

**Signature of Inspector /**  
**Signature de l'inspecteur :**

**Name of Inspector /**  
**Nom de l'inspecteur :** Janet Groux

**Service Area Office /**  
**Bureau régional de services :** Central West Service Area Office