

Ministry of Long-Term Care

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

London District

130 Dufferin Avenue, 4th Floor London, ON, N6A 5R2 Telephone: (800) 663-3775

	Original Public Report
Report Issue Date: August 22, 2024	
Inspection Number: 2024-1473-0004	
Inspection Type:	
Complaint	
Critical Incident	
Follow up	
Licensee: Henley Place Limited	
Long Term Care Home and City: Henley Place, London	
Lead Inspector	Inspector Digital Signature
Additional Inspector(s)	

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): August 14, 15, 19, 20, 2024.

The following intake(s) were inspected:

Intake: #00117064 - Critical Incident System (CIS) report #3045-000051-24 related to alleged verbal abuse;

Intake: #00117398 - CIS report #3045-000055-24 related to alleged verbal

abuse;

Intake: #00117400 - CIS report #3045-000056-24 related to alleged verbal

abuse:

Intake: #00118415 - Follow-up for Compliance Order (CO) #001 from inspection 2024-1473-0003 related to O. Reg. 246/22 - s. 102 (8) Infection Prevention and



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Control with Compliance Due Date (CDD) July 5, 2024;

Intake: #00118480 -Complainant with multiple concerns regarding the operation of the home:

of the home;

Intake: #00120456 - CIS report #3045-000071-24 related to a declared outbreak;

Intake: #00123896 - CIS report #3045-000074-24 related to subsequent

declared outbreak.

The following intake(s) was reviewed:

Intake: #00117117 - CIS report #3045-000054-24 related to a resident fall.

Previously Issued Compliance Order(s)

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

Order #001 from Inspection #2024-1473-0003 related to O. Reg. 246/22, s. 102 (8).

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

Housekeeping, Laundry and Maintenance Services Infection Prevention and Control Responsive Behaviours

Prevention of Abuse and Neglect



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INSPECTION RESULTS

WRITTEN NOTIFICATION: Program Evaluation

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

Non-compliance with: O. Reg. 246/22, s. 34 (1) 4.

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:
- 4. The licensee shall keep a written record relating to each evaluation under paragraph 3 that includes the date of the evaluation, the names of the persons who participated in the evaluation, a summary of the changes made and the date that those changes were implemented.

The licensee has failed to keep a written record of the annual evaluation of the accommodation services programs that included the date of the evaluation, the names of the persons who participated in the evaluation, a summary of the changes made and the date that those changes were implemented.

Rational and Summary

In an interview the Administrator said they completed the annual evaluation of the Accommodation Services Programs in February 2024, but they could not find the written record of the evaluation. They said the expectation was to have a written record of the annual evaluation as required.

Sources: staff interview.



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WRITTEN NOTIFICATION: Housekeeping

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

Non-compliance with: O. Reg. 246/22, s. 93 (2) (a) (i)

Housekeeping

s. 93 (2) As part of the organized program of housekeeping under clause 19 (1) (a) of the Act, the licensee shall ensure that procedures are developed and implemented for.

- (a) cleaning of the home, including,
- (i) resident bedrooms, including floors, carpets, furnishings, privacy curtains, contact surfaces and wall surfaces.

The licensee failed to ensure that staff complied with the home's daily resident room cleaning procedures.

Rational and Summary:

As per O. Reg. 246/22, s. 11 (1) (b), the licensee shall ensure that where the Act or Regulations required the licensee of a long-term care home to have, institute, or otherwise put in place any policy, the licensee was required to ensure that the policy was complied with.

The home's Housekeeping Procedure: Daily Resident Room Cleaning LTC policy stated that all resident rooms will be at a minimum cleaned daily.

In interviews with multiple housekeeping staff they all said they did not complete cleaning of all resident rooms on their assigned areas on a daily basis.

In an interview the Administrator and the Environmental Project Consultant said they completed a third party audit of the home and identified concerns related to



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housekeeping. They were aware that not all resident rooms were being cleaned daily as per the policy. They were having meetings with all team members to provide education on the process. They said the expectation was for the staff to comply with the home's policy to ensure all resident rooms were being cleaned daily.

There was a risk to residents as their rooms were not being cleaned daily.

Sources: staff interviews, record reviews.

WRITTEN NOTIFICATION: Housekeeping

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

Non-compliance with: O. Reg. 246/22, s. 93 (2) (b) (iii)

Housekeeping

s. 93 (2) As part of the organized program of housekeeping under clause 19 (1) (a) of the Act, the licensee shall ensure that procedures are developed and implemented for,

(b) cleaning and disinfection of the following in accordance with manufacturer's specifications and using, at a minimum, a low level disinfectant in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices:

(iii) contact surfaces;

The licensee failed to ensure that staff complied with the home's Housekeeping Cleaning Procedures related to contact surfaces.

Rational and Summary:

As per O. Reg. 246/22, s. 11 (1) (b), the licensee shall ensure that where the Act or



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Regulations required the licensee of a long-term care home to have, institute, or otherwise put in place any policy, the licensee was required to ensure that the policy was complied with.

The home's Housekeeping Procedure: High Touch Surface Cleaning Pandemic/Outbreak policy stated that high touch surfaces should be cleaned on a daily basis at a minimum.

In interviews with multiple housekeeping staff members they all said they did not complete high touch surface area cleaning for every resident room on a daily basis.

In an interview the ADOC said they conducted an audit related to high touch surface area cleaning and they found out the cleaning was not being conducted at least once daily as per the procedure.

In an interview the Administrator and the Environmental Project Consultant said they were aware of the audit results related to daily cleaning of high touch surface areas. They were having meetings with all team members to provide education on the process. They said the expectation was for the staff to comply with the home's policy to ensure all high touch surface areas were cleaned at least once daily.

There was a risk to residents as the high touch surface areas were not cleaned at least once daily.

Sources: staff interviews, record reviews.



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WRITTEN NOTIFICATION: Hazardous Substances

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

Non-compliance with: O. Reg. 246/22, s. 97

Hazardous substances

s. 97. Every licensee of a long-term care home shall ensure that all hazardous substances at the home are labelled properly and are kept inaccessible to residents at all times.

The licensee has failed to ensure that all hazardous substances at the home were kept inaccessible to residents at all times.

Rational and Summary:

An observation during this inspection showed a housekeeping cart that was unlocked and unattended. The cleaning and disinfectant containers were in the cart and accessible to residents. During the observation there were no residents close to the cart.

A housekeeping staff member said when they left there were no residents around. They said the expectation was to lock the cart when it was unattended.

The Administrator said the expectation was for all hazardous substances to be kept inaccessible to residents at all times.

There was a risk to the residents when the housekeeping cart was left unlocked, unattended and hazardous substance were left accessible to residents.

Sources: Observation and staff interviews.