

Original Public Report

Report Issue Date October 31, 2022

Inspection Number 2022_1033_0001

Inspection Type

- ☐ Critical Incident System
 ☐ Complaint
 ☐ Follow-Up
 ☐ Director Order Follow-up
☐ Proactive Inspection
 ☐ SAO Initiated
 ☒ Post-occupancy
☐ Other _____

Licensee

Jarlette Ltd. c/o Jarlette Health Services

Long-Term Care Home and City

The Villa Care Centre, Midland

Lead Inspector

Tracy Muchmaker (690)

Inspector Digital Signature

Additional Inspector(s)

Sylvie Byrnes (627)

INSPECTION SUMMARY

The inspection occurred on the following date(s): October 11-14, 2022

The following intake(s) were inspected:

- One intake for a Post Occupancy Inspection

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

- Food, Nutrition and Hydration
- Infection Prevention and Control (IPAC)
- Resident Care and Support Services
- Safe and Secure Home

INSPECTION RESULTS

WRITTEN NOTIFICATION MINISTER'S DIRECTIVES

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

Non-compliance with: FLTCA, 2021 s. 184 (3)

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

Sudbury Service Area Office
159 Cedar Street, Suite 403
Sudbury ON P3E 6A5
Telephone: 1-800-663-6965
SudburySAO.moh@ontario.ca

The licensee has failed to ensure that when the Minister issued a directive, the directive was complied.

Rationale and Summary

The COVID-19 guidance document for long-term care homes in Ontario directed homes to complete Infection Prevention and Control (IPAC) audits weekly when the home was in a Covid-19 outbreak, including, at minimum, the completion of Public Health Ontario (PHO)'s COVID-19: Self-Assessment Audit tool for Long Term Care Homes and Retirement Homes.

Review of the home's completed IPAC audits, identified that there was no PHO Self-Assessment Audit Tool for Long Term Care Homes completed for two of the weeks during the Covid-19 outbreak period.

The IPAC lead stated that they had been completing daily and weekly audits, however the PHO self-assessment Audit Tool for Long Term Care Homes and Retirement Homes was being completed every two weeks. The Director of Care (DOC) stated that the PHO self-assessment audit tool from was to be completed every week during a covid-19 outbreak, and that it had been missed on those weeks.

Not completing the PHO self-assessment audit tool on a weekly basis during the outbreak caused a minimal risk to the residents as the home was conducting the audits every two weeks.

Sources: Critical Incident System (CIS) report for Disease outbreak; COVID-19 guidance document for long-term care homes in Ontario; review of the home's completed PHO Self-Assessment Audit Tool for Long Term Care Homes and Retirement Homes; interviews with the IPAC Lead and the DOC.

[#690]

WRITTEN NOTIFICATION INFECTION PREVENTION AND CONTROL

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

Non-compliance with: O. Reg. 246/22 s. 102 (2) b

The licensee has failed to ensure that the Infection Prevention and Control (IPAC) standards that were issued by the Minister were implemented, specific to hand hygiene (HH).

Rationale and Summary

During a lunch meal service, not all residents were assisted or encouraged to complete HH prior to their meal. Personal Support Worker (PSW) staff acknowledged that residents should have been assisted with HH; however, this had not occurred as the meal service was "running behind".

The lack of assistance for hand hygiene prior to a meal service caused a moderate risk to the residents, as there was a Covid outbreak on another unit.

Sources: Observations of the lunch meal service; The Home's policy titled, "LTC Hand Hygiene Program", Version #6, last revised August 16, 2022; Infection Prevention and Control Standard for Long-Term Care, April 2022. Interviews with PSW staff, a Registered Practice Nurse (RPN), and the IPAC Lead.

[#627]