

Ministère des Soins de longue durée

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) /

Inspection No / Date(s) du Rapport No de l'inspection Loa #/ No de registre Type of Inspection / **Genre d'inspection**

Mar 24, 2021

2021 772691 0007

000499-21, 002561-21, 002627-21

Complaint

Licensee/Titulaire de permis

The District of the Municipality of Muskoka 98 Pine Street Bracebridge ON P1L 1N5

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

The Pines 98 Pine Street Bracebridge ON P1L 1N5

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

JENNIFER NICHOLLS (691), TRACY MUCHMAKER (690)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): February 22-March 3, 2021.

The following intakes were inspected upon during this Critical Incident System Inspection:

-Three intakes which were complaints that were submitted to the Director regarding essential visitor restrictions related to COVID-19.

A Follow up Inspection (2021_772691_0005) and Critical Incident Inspection (2021_772691_0006) were conducted concurrently with this inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Associate Director of Care (ADOC), Registered Nurses (RNs), Registered Practical Nurses (RPNs), Personal Support Worker (PSWs), Nursing Service Aides (NSAs), and residents.

The Inspector (s) also conducted a daily tour of resident care areas, observed the provision of care to residents, observed staff to resident interactions, observed Infection Prevention and Control practices, reviewed relevant health care records, internal investigation notes, reviewed relevant family communication logs, complaint logs, essential care giver logs, as well as relevant policies and procedures.

The following Inspection Protocols were used during this inspection:
Continence Care and Bowel Management
Dignity, Choice and Privacy
Personal Support Services
Reporting and Complaints
Responsive Behaviours



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

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

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend	Légende
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	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).	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	Ce qui suit constitue un avis écrit de non- respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.



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WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 3. Residents' Bill of Rights

Specifically failed to comply with the following:

- s. 3. (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:
- 14. Every resident has the right to communicate in confidence, receive visitors of his or her choice and consult in private with any person without interference. 2007, c. 8, s. 3 (1).

Findings/Faits saillants:

1. The licensee has failed to ensure that residents had the right to receive essential caregivers of his or her choice as per Directive #3.

As per COVID-19 Directive #3 that was issued by the Chief Medical Officer of Health, long-term care homes were responsible for supporting, implementing and facilitating residents in receiving essential caregivers while mitigating the risk of exposure to COVID-19. The long-term care home was to allow each resident to designate up two essential caregivers to provide direct care support to the resident, as defined in the directive.

Furthermore, as per the Ministry of Long Term Care "COVID-19 visiting policy", it indicated that if the local public health unit was in the Orange, Red or Grey zone, or if the home was in an outbreak, only essential visitors were permitted in the home and a maximum of one caregiver per resident may visit at a time.

On December 24, 2020, the government had announced a Province wide Shutdown effective Saturday, December 26, 2020, at 12:01 a.m to help stop the spread of COVID-19. On December 26, 2020, Ontario Regulation 363/20: Stages of Reopening under the Reopening Ontario (A Flexible Response to COVID-19) Act, 2020, was amended to move all public health units into the Grey zone. The Assistant Deputy Minister addressed a memo to Long-Term Care Home Stakeholders that reiterated the requirements and restrictions applicable to long-term care homes which included all homes were to follow the applicable requirements and restrictions based on the Grey Zone in regards to visiting policies, which included allowing essential care givers to continue to visit, one caregiver at a time.



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On January 14, 2021, a provincial emergency was declared and a stay-at-home order was issued. The Assistant Deputy Minister addressed a memo to Long-Term Care Home Stakeholders that indicated that these enhanced measures did not impact the current requirements for essential visits to long-term care homes and that during the declared provincial emergency, all homes were required to follow the applicable requirements and restrictions based on the Grey zone.

The Inspector reviewed a home's document which identified that essential visits to The Pines were suspended for a one month period following the announcement of the provincial lockdown commencing on December 26, 2020.

During an interview with Inspector #691, the Administrator and DOC indicated that all essential caregiver visits were suspended, with the exception of palliative/end of life visitors, and this was a collaborative decision.

Sources: COVID-19 Directive #3 for Long-Term Care Homes, dated December 27, 2020; Ministry of Long-Term Care "COVID-19 Visiting Policy" dated December 26, 2020; ADM memos to the sector dated December 24, 2020 and January 14, 2021; the home's policy titled "COVID-19 Visitor Policy and Procedures, last revised June 22, 2020; the home's policy titled Policy: Essential Caregiver Visits (Long-Term Care), last revised October 16, 2020; the document titled Changes to Essential Visitor Policy"; and interviews with the Administrator, DOC, and other staff member [s. 3. (1) 14.]

Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance ensuring that residents have the right to pursue social interests, and that residents have the right to receive visitors of their choice to be, to be implemented voluntarily, to be implemented voluntarily.



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Issued on this 7th day of April, 2021

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

Original report signed by the inspector.