

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

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Original Public Report

Report Issue Date: July 19, 2024

Inspection Number: 2024-1301-0005

Inspection Type:

Complaint

Follow up

Licensee: The Glebe Centre Incorporated

Long Term Care Home and City: Glebe Centre, Ottawa

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): July 12, 15, 16, 17 and 18, 2024.

The following intake(s) were inspected:

- Intake: #00114286 was follow up #: 1 to Compliance Order (CO) #002 issued in #2024-1301-0002 under O. Reg 246/22, s. 12 (1) 3. with a Compliance Due Date (CDD) of May 30, 2024.
- Intake: #00114287 was follow up #: 1 to CO #001 issued in #2024-1301-0002 under FLTCA, s. 25 (1) with a CDD of May 30, 2024.
- Intake: #00114288 was follow up #: 1 to CO #003 issued in #2024-1301-0002 under O. Reg 246/22, s. 20 (g) with a CDD of May 30, 2024.
- Intake: #00114289 was follow up #: 2 to CO #001 issued in #2023-1301-0004 under O. Reg. 246/22, s. 20 (a) with an amended CDD of January 31, 2024.
- Intake: #00114290 was follow up #: 2 to CO #002 issued in #2023-1301-0004 under O. Reg. 246/22, s. 20 (c) with an amended CDD of January 31, 2024.

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- Intake: #00114291 was follow up #: 2 to CO #003 issued in #2023-1301-0004 under O. Reg. 246/22, s. 20 (e) with an amended CDD of January 31, 2024.
- Intake: #00116835 was a complaint related to the administration of a treatment.
- Intake: #00119176 was a complaint related to pest control.
- Intake: #00120875 was a complaint related to air temperatures.

Previously Issued Compliance Order(s)

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

Order #002 from Inspection #2024-1301-0002 related to O. Reg. 246/22, s. 12 (1) 3.

Order #001 from Inspection #2024-1301-0002 related to FLTCA, 2021, s. 25 (1).

Order #003 from Inspection #2024-1301-0002 related to O. Reg. 246/22, s. 20 (g).

Order #001 from Inspection #2023-1301-0004 related to O. Reg. 246/22, s. 20 (a).

Order #002 from Inspection #2023-1301-0004 related to O. Reg. 246/22, s. 20 (c).

Order #003 from Inspection #2023-1301-0004 related to O. Reg. 246/22, s. 20 (e).

The following Inspection Protocols were used during this inspection:

Resident Care and Support Services
Housekeeping, Laundry and Maintenance Services
Safe and Secure Home

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Infection Prevention and Control
Prevention of Abuse and Neglect

INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of Care

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

Non-compliance with: FLTCA, 2021, s. 6 (5)

Plan of care

s. 6 (5) The licensee shall ensure that the resident, the resident's substitute decision-maker, if any, and any other persons designated by the resident or substitute decision-maker are given an opportunity to participate fully in the development and implementation of the resident's plan of care.

The licensee has failed to ensure that a resident's substitute decision-maker was given an opportunity to participate fully in the implementation of the resident's plan of care related to the administration of a treatment.

Sources: A review of a resident's health care record and interviews with staff members.

WRITTEN NOTIFICATION: Plan of Care

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

Non-compliance with: FLTCA, 2021, s. 6 (7)

Plan of care

s. 6 (7) The licensee shall ensure that the care set out in the plan of care is provided

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to the resident as specified in the plan.

The licensee has failed to ensure that the care set out in the plan of care was provided to a resident as specified in the plan, as the doctor wrote an order for an assessment, and the referral was not sent to the service provider.

Sources: A review of the resident's health care record and interview with a staff member.

WRITTEN NOTIFICATION: Air Conditioning Requirements

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

Non-compliance with: O. Reg. 246/22, s. 23.1 (1) 1.

Air conditioning requirements

s. 23.1 (1) Every licensee of a long-term care home shall ensure that air conditioning is installed, operational and in good working order for the purpose of cooling the temperature in the following areas of the long-term care home during at least the period from May 15 to September 15 in each year:

1. Every resident bedroom.

The licensee has failed to ensure that air conditioning was in good working order for the purpose of cooling the temperature in a resident's room when air temperatures were recorded to be 26.0 degrees Celsius or greater.

Source: Observations.

WRITTEN NOTIFICATION: Air Temperature

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

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Non-compliance with: O. Reg. 246/22, s. 24 (2) 1.

Air temperature

s. 24 (2) Every licensee of a long-term care home shall ensure that the temperature is measured and documented in writing, at a minimum in the following areas of the home:

1. At least two resident bedrooms in different parts of the home.

The licensee has failed to ensure that the air temperature was measured and documented in writing, in at least two resident bedrooms in different parts of the home at least once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night.

Sources: Review of temperature monitoring records and interview with a staff member.

WRITTEN NOTIFICATION: Air Temperature

NC #005 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 24 (3)

Air temperature

s. 24 (3) The temperature required to be measured under subsection (2) shall be documented at least once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night.

The licensee has failed to ensure that the temperature required to be measured under subsection (2) was documented at least once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night, when two sets of air temperature measurements were recorded, and not three as required.

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Sources: Review of temperature monitoring records and interview with a staff member.

WRITTEN NOTIFICATION: Pest Control

NC #006 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 94 (1)

Pest control

s. 94 (1) As part of organized programs of housekeeping and maintenance services under clauses 19 (1) (a) and (c) of the Act, every licensee of a long-term care home shall ensure that an organized preventive pest control program using the services of a licensed pest controller is in place at the home, including records indicating the dates of visits and actions taken.

The licensee has failed to ensure the preventative pest control program was complied with.

In accordance with Ontario Regulation (O. Reg.) 246/22 s. 94 (1), the licensee shall ensure that there is a preventative pest control program in place, and in accordance with O. Reg. 246/22 s. 11 (1) (b), the program shall be complied with.

The licensee failed to comply with a specific policy when a staff member was observed in a room with a known pest, and they were not wearing a piece of personal protective equipment, as required by the policy.

Sources: Observations and review of a policy.

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NOTICE OF RE-INSPECTION FEE Pursuant to section 348 of O. Reg. 246/22 of the Fixing Long-Term Care Act, 2021, the licensee is subject to a re-inspection fee of \$500.00 to be paid within 30 days from the date of the invoice.

A re-inspection fee applies since this is, at minimum, the second follow-up inspection to determine compliance with the following Compliance Order(s) under s. 155 of the FLTCA, 2021, and/or s. 153 of the LTCHA, 2007.

The following previously issued Compliance Order(s) were found NOT to be in compliance during follow up #: 1 from inspection #2024-1301-0002:

Order #002 from Inspection #2023-1301-0004 related to O. Reg. 246/22, s. 20 (c).

Order #003 from Inspection #2023-1301-0004 related to O. Reg. 246/22, s. 20 (e).

Order #001 from Inspection #2023-1301-0004 related to O. Reg. 246/22, s. 20 (a).

Licensees must not pay a Re-Inspection Fee from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the Re-Inspection Fee.