Ontario

Inspection Report Under the
Fixing Long-Term Care Act, 2021

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

Central East District
33 King Street West, 4th Floor
Oshawa, ON, L1H 1A1
Telephone: (844) 231-5702

Public Report

Report Issue Date: April 7, 2025

Inspection Number: 2025-1260-0001

Inspection Type:
Critical Incident
Follow up

Licensee: The Royale Development GP Corporation as general partner of The Royale Development LP

Long Term Care Home and City: Cedarvale Lodge Community & Retirement Living, Keswick

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 31, 2025, and April 1 to 4, and 7, 2025

The following intake(s) were inspected:

- An intake- Follow-up #2, CO#001, workspace 2024_1260_0002, O. Reg. 246/22 - s. 93 (2) (a)Housekeeping, CDD October 31, 2024. Extended to Feb. 21, 2025
- One intake related to disease outbreak
- Three intakes related to Fall prevention and management.

Previously Issued Compliance Order(s)

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

Order #001 from Inspection #2024-1260-0002 related to O. Reg. 246/22, s. 93 (2) (a)

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

Infection Prevention and Control
Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: FALLS PREVENTION AND MANAGEMENT

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 54 (2)
Falls prevention and management
s. 54 (2) Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls. O. Reg. 246/22, s. 54 (2); O. Reg. 66/23, s. 11.

The licensee has failed to ensure that a post-fall assessment was conducted when a resident sustained a fall.

A resident sustained an unwitnessed fall resulting in significant change in residents' health condition.

The resident did not receive a post fall assessment at the time of the incident.

The Director of Care (DOC) and Associate Director of Care (ADOC) indicated that the staff did not follow the fall prevention and management policy that a post-fall assessment should have been conducted by the registered staff.

Sources: Resident's progress notes, assessments, the home's Falls Prevention & Management policy; Interviews with RPN, ADOC and DOC.

WRITTEN NOTIFICATION: INFECTION PREVENTION AND CONTROL PROGRAM

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 102 (9) (a)
Infection prevention and control program
s. 102 (9) The licensee shall ensure that on every shift,
(a) symptoms indicating the presence of infection in residents are monitored in accordance with any standard or protocol issued by the Director under subsection (2); and

The licensee failed to ensure that a resident's symptoms indicating the presence of infection were monitored on every shift during an infectious disease outbreak.

Documentation submitted by the home to the local Public Health Unit (PHU), reported a resident's onset of infectious disease symptoms.

The Infection and prevention and control (IPAC) lead indicated that registered staff should monitor and document symptoms on every shift, in Point Click Care (PCC) under progress notes, The resident's progress notes confirmed that the registered staff were not monitoring resident's infectious disease symptoms on every shift.

Sources: CIR, resident's progress notes, interview with IPAC lead.

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.
Follow #2, CO #001, Workspace 2024_1260_0002, O.Reg. 24/22-s.93 (2) (a) Housekeeping, CDD October 31, 2024, Extended to Feb 21, 2025

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.

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