



**Ministry of Long-Term
Care**

**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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Public Copy/Copie du rapport public

Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Mar 8, 2022	2022_831211_0001	002106-22	Complaint

Licensee/Titulaire de permis

Centre d'Accueil Roger Seguin
435 Lemay Street Clarence Creek ON K0A 1N0

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

Centre d'Accueil Roger Seguin
435 Lemay Street Clarence Creek ON K0A 1N0

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

JOELLE TAILLEFER (211), LISA CUMMINGS (756)

Inspection Summary/Résumé de l'inspection

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

This inspection was conducted on the following date(s): February 10, 11, 15, 16, 17, 2022 (onsite).

During the inspection log #002106-22 was inspected related to medication administration, Infection Prevention and Control practices, housekeeping services, laundry services, and COVID-19 testing and vaccination.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care (DOC), the Coordinator of Quality of Care and Risk Assessment, Registered Nurses (RNs) and Registered Practical Nurses (RPNs), Personal Support Workers (PSWs), Environmental Services Supervisor, screeners, a housekeeper, the Eastern Ontario Public Health Unit, the Public Health Ontario Laboratory and residents.

During the course of the inspection, the inspectors observed resident and staff interactions, the provision of resident care and services, infection prevention and control practices, the entrance of the home including screening, testing and PPE donning and doffing areas, and resident home areas including rooms on isolation precautions. A record review was completed of resident healthcare records, staff N95 mask fit testing documents, internal and external emails, a resident vaccination eligibility list, the written housekeeping routine, Policy #ADM-RH 1414.1, Immunisation Covid-19, revised February 2022, and Policy #PREV INF 5003.1, Immunisation contre la Covid-19 for les residents, revised January 2022.

The following Inspection Protocols were used during this inspection:

Accommodation Services - Housekeeping

Accommodation Services - Laundry

Infection Prevention and Control

Medication

During the course of this inspection, Non-Compliances were not issued.

0 WN(s)

0 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

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Legend WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	Légende WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
<p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>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).</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>



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Issued on this 9th day of March, 2022

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

Original report signed by the inspector.