

Ministry of Long-Term Care

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

London District

130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

**Immediate Compliance
Order**

Original Public Report

Report Issue Date: February 21, 2024	
Inspection Number: 2024-1004-0001	
Inspection Type: Complaint Critical Incident Follow up	
Licensee: Omni Healthcare (CT) GPCO Ltd. as General Partner of Omni Healthcare (Country Terrace) Limited Partnership	
Long Term Care Home and City: Country Terrace, Komoka	
Lead Inspector Julie Lampman (522)	Inspector Digital Signature
Additional Inspector(s) Christie Birch (740898) Inspector #000821 and Inspection Manager #754 were also present during this inspection.	

INSPECTION REPORT SUMMARY

The inspection occurred on the following date(s): February 21, 2024

The following intake was inspected:

Intake: #00108872-complainant related to resident care and safety.

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COMPLIANCE ORDER [ICO #901] Home To Be Safe, Secure Environment

NC# 001 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: FLTCA, 2021, s. 5

Home to be safe, secure environment s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents.

The Inspector is ordering the licensee to:

FLTCA, 2021, s.155 (1) (a) do anything, or refrain from doing anything, to achieve compliance with a requirement under this Act

Compliance Order: [FLTCA 2021, s. 155 (1)]

The Licensee has failed to comply with FLTCA, 2021, s. 5

The licensee must ensure:

- A) All doors leading to the construction area of the original building are closed and locked unless directly supervised by the home's staff;
- B) The door to a specific nurses' station is closed and locked unless directly supervised by the home's staff;
- C) The door to a specific servery is closed and locked unless directly supervised by the home's staff;
- D) Doors to nonresident areas in the basement are closed and locked unless directly supervised by the home's staff;
- E) Actions are taken to work towards a minimum temperature of 22 degrees Celsius in the elevators and surrounding areas of the new building.

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Grounds

The licensee has failed to ensure that the home was a safe and secure environment for its residents.

Rationale and Summary

A) On February 20, 2024, during an initial tour of the original home building, Inspector #522, Inspector #740898 and Inspector #000821 observed that two home areas which were under construction were accessible to residents.

The lounge in the area had several bottles of different chemicals and other items that should not be accessible to residents. During this time several residents were noted coming through the area to go outside through the main door of the original home.

The Acting Administrator (AA) and Acting Director of Care (ADOC) confirmed that residents were still using this area to gain access to the outdoors and acknowledged that the items should not be accessible to residents, nor should the construction areas be accessible to residents.

On two separate occasions, the door to the dining room in the area was unlocked with an unsupervised resident in the area. There was a door in the dining room that was unlocked, and access could be obtained to the construction area. The AA stated that the door to the dining room would be locked so unsupervised residents could not gain access to the area.

On February 21, 2024, Inspector #522, Inspector #740898, Inspector #000821 and Inspection Manager #754 observed a plywood wall with a door built at the end of the hallway to preclude entrance to the construction area. The door was unlocked

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and access to the construction area could be gained, the area was not supervised. The Environmental Services Manager (ESM) stated the door should be locked to prevent residents from accessing the area.

The construction area was still accessible from the home area dining room as the door in the dining room that attached to the construction area was not locked. The AA stated that the door from the dining room to the construction area did not lock from inside the dining room.

B) On four separate occasions, a nurses' station door which was open and no staff were present in the nurses' station. Inside the door to the nurses' station there were three unlocked cupboards which contained several medications. The nurses' station also had a room with open double doors off of it where resident charts and desks were located.

Two staff members stated the door to the nurses' station did not lock. A registered staff member stated they did not have keys to lock the door.

The ADOC accompanied the inspectors in the nurses' station and confirmed that the cupboards containing the medications and nursing supplies should be locked and the door to the nurses' station should be closed.

The AA stated that staff were to close the double doors to the back room of the nurses' station if staff were not present and close the door to the nurses' station.

C) Inspectors noted the temperatures in the new building elevator as well as the vestibules outside two home areas were cool.

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Inspectors #522 and Inspector #000821 observed the ESM take temperatures and noted one elevator was 14.6 degrees Celsius (C), one vestibule was 16.7 C and the other vestibule was 18.2 C.

The ESM acknowledged the temperatures in the areas were below requirements. The ESM stated the temperatures in the elevator were cooler as the area underneath the elevator shaft was not completed.

D) On another occasion, the ESM, Inspector #522 and Inspector #000821 noted a servery door unlocked and unsupervised. The housekeeping room in the servery was open with a housekeeping cart and chemicals accessible. The ESM stated the door should not be open, but they were having issues with the lock and were waiting for a magnetic lock to be installed.

E) On another occasion, Inspector #740898 and Inspector #000821 observed that the basement could be accessed and there were unlocked rooms and access to non-resident areas.

There was immediate risk to residents who lived in the home as non-resident areas were accessible to residents. There was risk to residents in the new building as air temperatures in resident areas were below 22 degrees Celsius

Sources:

Observations of the home and interviews with the ESM, Acting DOC and Acting Administrator and other staff. [522

This order must be complied with by: Immediately and no later than February 22, 2024, at 1000 hours.

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REVIEW/APPEAL INFORMATION

TAKE NOTICE

The licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Monetary Penalty (AMP) in accordance with section 169 of the *Fixing Long-Term Care Act, 2021* (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB).

The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email, or commercial courier upon:

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th floor
Toronto, ON, M7A 1N3

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e-mail: MLTC.AppealsCoordinator@ontario.ca

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this (these) Order(s) is (are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act;
- (b) An AMP issued by the Director under section 158 of the Act; or
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP, or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

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**Health Services Appeal and
Review Board**

Attention Registrar
151 Bloor Street West, 9th Floor
Toronto, ON M5S 1S4

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th Floor
Toronto, ON, M7A 1N3

e-mail:

MLTC.AppealsCoordinator@ontario.ca

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website www.hsarb.on.ca.