

**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) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
May 12, 2021	2021_605213_0011	004596-21, 007334-21	Critical Incident System

Licensee/Titulaire de permis

The Corporation of the City of London
355 Wellington St, 2nd Floor, Suit 248 London ON N6A 3N7

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

Dearness Home for Senior Citizens
710 Southdale Road East London ON N6E 1R8

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

RHONDA KUKOLY (213)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): May 6, 10, 11, 2021.

The following two critical incident intakes were completed during this inspection:

Log #004596-21, critical incident # M514-000005-21, related to a fall

Log #007334-21, critical incident #M514-000007-21, related to an outbreak

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, the Environmental Services Manager, Registered Practical Nurses, Personal Support Workers, Housekeeping Aides, residents and family members.

The inspector also made observations and reviewed health records, policies and procedures, education records, product information sheets and other relevant documentation.

The following Inspection Protocols were used during this inspection:

Falls Prevention

Infection Prevention and Control

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

1 WN(s)

0 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Légende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<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>

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 8. Policies, etc., to be followed, and records

Specifically failed to comply with the following:

s. 8. (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, procedure, strategy or system, the licensee is required to ensure that the plan, policy, protocol, procedure, strategy or system,
(a) is in compliance with and is implemented in accordance with applicable requirements under the Act; and O. Reg. 79/10, s. 8 (1).
(b) is complied with. O. Reg. 79/10, s. 8 (1).

Findings/Faits saillants :

1. The licensee has failed to ensure that the Dusting Cleaning Procedure and the Twice Daily Cleaning Checklist – Disinfectant, as part of the organized program of housekeeping, were complied with.

O. Reg 79/10 s. 87 (2) requires the licensee, as part of the organized program of housekeeping to ensure that procedures are developed and implemented for, (a) cleaning of the home, including, (i) resident bedrooms, including floors, carpets, furnishings, privacy curtains, contact surfaces and wall surfaces, and (ii) common areas and staff areas, including floors, carpets, furnishings, contact surfaces and wall surfaces; (b) cleaning and disinfection of the following in accordance with manufacturer's specifications and using, at a minimum, a low level disinfectant in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices.

Specifically, staff did not comply with the home's Dusting Cleaning Procedure and the Twice Daily Cleaning Checklist – Disinfectant.

The policy "Dusting Cleaning Procedure" stated: With disinfectant cleaner damp dust/wipe all high touch surfaces that come in contact with residents, visitors and staff such as over-bed tables, bedside tables, bed rails, lamp fixtures, door knobs, light switches, call bells, hand rails, telephones and tables, etc.

The Twice Daily Cleaning Checklist – Disinfectant stated: A hospital grade disinfectant is applied to all "high touch" surfaces in the room. Follow manufacturer's instructions for contact time.

A Housekeeping Aide said that they use either Buckeye E15 Hydrogen Peroxide Cleaner

or Buckeye E23 Neutral Disinfectant to clean all surfaces and contact points in resident rooms, and that they were taught that they could use either product.

Buckeye E15 Hydrogen Peroxide Cleaner is a general purpose cleaner but is not a low level disinfectant. Buckeye E23 Neutral Disinfectant is low level disinfectant designed for use in hospital, healthcare and industrial settings and is effective against a broad spectrum of organisms, including human coronavirus.

The Environmental Services Manager said that the expectation was for the housekeeping staff to use the product Buckeye E23 for cleaning all surfaces in resident rooms.

There was risk to residents when the appropriate disinfectant was not used to clean during a pandemic.

Sources: The home's policy and procedure "Dusting Cleaning Procedure" #HL-05-03-06-APX4, revised March 8, 2019, the home's procedure "Twice Daily Cleaning Checklist – Disinfectant", revised December 2017, observations of cleaning and cleaning supplies as well as interview with a Housekeeping Aide and the Environmental Services Manager. [s. 8. (1) (b)]

Issued on this 12th day of May, 2021

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

Original report signed by the inspector.