

**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
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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
Apr 15, 2021	2021_765541_0006	005703-21	Complaint

Licensee/Titulaire de permisKeay Nursing Homes Inc.
15 Oakwood Links Lane Grand Bend ON N0M 1T0**Long-Term Care Home/Foyer de soins de longue durée**E. J. McQuigge Lodge
38 Black Diamond Road P.O. Box 68 Cannifton ON K0K 1K0**Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs**

AMBER LAM (541)

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): April 14, 2021

Log #005703-21 regarding essential caregivers was inspected.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care and a family member of a resident. In addition the inspector reviewed documents provided by the home related to essential caregivers.

The following Inspection Protocols were used during this inspection:

**Dignity, Choice and Privacy
Infection Prevention and Control**

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

- 1 WN(s)**
- 1 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 LTCHA, 2007 S.O. 2007, c.8, s. 3.
Residents' Bill of Rights****Specifically failed to comply with the following:**

s. 3. (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

**14. Every resident has the right to communicate in confidence, receive visitors of his or her choice and consult in private with any person without interference.
2007, c. 8, s. 3 (1).**

Findings/Faits saillants :

1. The Licensee has failed to fully respect and promote that every resident had the right to receive visitors of his or her choice.

COVID-19 Directive #3 for Long-Term Care Homes under the LTCHA, 2007 issued under section 77.7 of the Health Protection and Promotion Act (HPPA), R.S.O 1990, c.H.7 states that Long-Term Care Homes must have a visitor policy in place that is compliant with this Directive and is guided by applicable policies, amended from time to time, from the MLTC (Ministry of Long-Term Care).

Policy "COVID-19: visiting long-term care homes" is a supplement to Directive #3 and was last updated December 26, 2020. The policy indicates that "a caregiver is a type of essential visitor who is designated by the resident and/or their substitute decision maker and is visiting to provide direct care to the resident (eg. supporting feeding, mobility, personal hygiene, cognitive stimulation, communication, meaningful connection, relational continuity and assistance in decision making)". It further states that two (2) caregivers may be designated per resident at a time and that the decision to designate an individual as a caregiver is entirely the remit of the resident and/or their substitute decision-maker and not the home.

The Administrator indicated only having one (1) essential caregiver at the time of the inspection. They further stated that the ability for this individual to come into the home to visit was dependent on the COVID-19 status of the community. At the time of the inspection, the individual was precluded from visiting the home.

The Administrator provided a list of 11 essential caregiver designations to the inspector and stated that each individual was at various stages in the process to becoming an essential caregiver. Of the 11 essential caregivers, four (4) individuals had completed all education requirements as per Directive #3 to become an essential caregiver however the home precluded them from visiting citing the COVID-19 status of the community.

In addition, the licensee developed a policy titled “Social and Essential Visitors” and indicated this is their current policy related to essential caregivers. The policy states “Visiting may cease at any time the community spread increases which may affect staff and employee safety.” As per Directive #3, “when the local public health unit is in the Orange, Red or Grey zone, or the home is in an outbreak, a maximum of 1 caregiver may visit the resident at a time.”

As a result, the residents' right to receive visitors of their choice was not fully respected and promoted.

Sources: Provincial Directive #3 and Provincial policy “COVID-19: visiting long-term care homes”, the home’s essential caregiver forms, the licensee’s policy “Social and Essential Visitors”, interviews with the Administrator, Director of Care, an Inspector from the Hastings Prince Edward County Public Health Unit and a family member of a resident. [s. 3. (1) 14.]

Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that every resident has the right to communicate in confidence, receive visitors of his or her choice and consult in private with any person without interference, to be implemented voluntarily.

Issued on this 15th day of April, 2021

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

Original report signed by the inspector.