

# 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 West District**

609 Kumpf Drive, Suite 105 Waterloo, ON, N2V 1K8 Telephone: (888) 432-7901

## **Public Report**

Report Issue Date: December 20, 2024

Inspection Number: 2024-1268-0006

**Inspection Type:**Critical Incident

**Licensee:** Eden House Care Facility Inc.

Long Term Care Home and City: Eden House Nursing Home, Guelph

## **INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): December 9, 10 and 12, 2024

The following intake(s) were inspected:

 Intake: #00122881 - IL-0129454-AH/2777-000020-24 - alleged resident to resident abuse

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

Infection Prevention and Control Prevention of Abuse and Neglect Responsive Behaviours

## **INSPECTION RESULTS**

## **Non-Compliance Remedied**

**Non-compliance** was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that



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the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: O. Reg. 246/22, s. 102 (2) (b)

Infection prevention and control program

s. 102 (2) The licensee shall implement,

(b) any standard or protocol issued by the Director with respect to infection prevention and control. O. Reg. 246/22, s. 102 (2).

In accordance with the (Infection Prevention and Control) IPAC Standard, revised September 2023, section 7.3 (b), the IPAC Lead shall ensure that audits are performed as required.

Specifically, the licensee has failed to ensure that the IPAC Lead had implemented audits, at least quarterly, to confirm that all staff could perform the IPAC skills required of their role.

### **Rationale and Summary**

Audits reviewed from July 2024 to December 2024 did not include night shift staff. The IPAC Lead stated that they did not audit night staff during that period but are now training registered staff to complete these audits.

When the LTCH failed to complete quarterly audits of role specific IPAC skills, the home was unaware if the IPAC practices being implemented by all staff.

Registered staff are now training and started doing audits Dec 12, 2024

**Sources**: Interview with the IPAC Lead, Hand Hygiene and personal protective equipment audits.

Date Remedy Implemented: December 12, 2024