

Ministry of Long-Term Care

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

North District

159 Cedar St, Suite 403
Sudbury, ON, P3E 6A5
Telephone: (800) 663-6965

Original Public Report

Report Issue Date: August 27, 2024

Inspection Number: 2024-1316-0001

Inspection Type:

Critical Incident

Licensee: Riverside Health Care Facilities Inc.

Long Term Care Home and City: EMO Health Centre, Emo

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): August 20, 2024

The inspection occurred offsite on the following date(s): August 21-22, 2024

The following intake(s) were inspected:

- Intake: #00110496 - Enteric Outbreak

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

Infection Prevention and Control

INSPECTION RESULTS

WRITTEN NOTIFICATION: Housekeeping

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 93 (2) (b) (ii)

Housekeeping

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s. 93 (2) As part of the organized program of housekeeping under clause 19 (1) (a) of the Act, the licensee shall ensure that procedures are developed and implemented for,

(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:

(ii) supplies and devices, including personal assistance services devices, assistive aids and positioning aids, and

The licensee has failed to ensure that cleaning and disinfection of supplies and devices are in accordance with manufacturer's specifications.

Rationale and Summary

Observations made within the home identified expired disinfectant for sanitization of supplies and devices in use throughout the home.

Interviews with an IPAC Lead, Manager, and the home's Administrator confirmed that expired disinfectant should not be used within the home.

Sources: Observations; and interviews with an IPAC Lead, Manager, and the home's Administrator.

WRITTEN NOTIFICATION: Infection prevention and control program

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 102 (15) 1.

Infection prevention and control program

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s. 102 (15) Subject to subsection (16), every licensee of a long-term care home shall ensure that the infection prevention and control lead designated under this section works regularly in that position on site at the home for the following amount of time per week:

1. In a home with a licensed bed capacity of 69 beds or fewer, at least 17.5 hours per week.

The licensee has failed to ensure that the infection prevention and control lead designated under this section works regularly in that position on site at the home for at least 17.5 hours per week.

Rationale and Summary

A review of the Infection Prevention and Control (IPAC) Lead schedule confirmed that the role is shared with two IPAC Leads working onsite, with the total combined hours onsite totaling less than 17.5 hours.

Interviews with an IPAC Lead and the Administrator confirmed that the home is not currently meeting the 17.5 hour requirement for IPAC Leads to be onsite in the home.

Sources: Review of IPAC Lead schedules, and interviews with an IPAC Lead and Administrator.

WRITTEN NOTIFICATION: CMOH and MOH

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 272

CMOH and MOH

s. 272. Every licensee of a long-term care home shall ensure that all applicable

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directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health or a medical officer of health appointed under the Health Protection and Promotion Act are followed in the home.

The licensee has failed to ensure that all recommendations issued by the Chief Medical Officer of Health or a medical officer of health appointed under the Health Protection and Promotion Act are followed in the home.

Specifically, Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings April 2024 (p. 24) requires that Alcohol Based Hand Rub (ABHR) must not be expired.

Rationale and Summary

Observations within the home identified expired ABHR in use at the main entrance of the home and in use during a meal service.

Interviews with an IPAC Lead, Manager, and Administrator confirmed that expired ABHR should not be in within the home.

Sources: Observations; and interviews with an IPAC Lead, Manager, and the home's Administrator.