

**Original Public Report**

<b>Report Issue Date</b>	September 1, 2022		
<b>Inspection Number</b>	2022_1420_0001		
<b>Inspection Type</b>			
<input type="checkbox"/> Critical Incident System	<input checked="" type="checkbox"/> Complaint	<input type="checkbox"/> Follow-Up	<input type="checkbox"/> Director Order Follow-up
<input type="checkbox"/> Proactive Inspection	<input type="checkbox"/> SAO Initiated		<input type="checkbox"/> Post-occupancy
<input type="checkbox"/> Other	_____		
<b>Licensee</b>			
F. J. Davey Home			
<b>Long-Term Care Home and City</b>			
F. J. Davey Home, Sault Ste Marie			
Choose an item.			
Jennifer Lauricella #542			
	<b>Inspector Digital Signature</b>		

**INSPECTION SUMMARY**

The inspection occurred on the following date(s): July 18 – 21, 2022

The following intake(s) were inspected:

- One intake, related to heating and cooling of the home;
- One intake, related to the home’s visitation policy;
- One intake, related to the communication and response system and
- One intake, related to resident funds.

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

- Infection Prevention and Control (IPAC)
- Safe and Secure Home

**INSPECTION RESULTS**

**WRITTEN NOTIFICATION; INFECTION PREVENTION AND CONTROL PROGRAM**

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

O. Reg. 246/22, s. 11 (1) (b)

The licensee failed has failed to comply with the Methicillin-Resistant Staphylococcus Aureus (MRSA) Infection, specifically the Testing Program for ARO's Algorithm.

**Rationale and Summary**

In accordance with O. Reg. 246/22, s. 102. (1), the licensee is required to ensure the home's Methicillin-Resistant Staphylococcus Aureus (MRSA) Infection was complied with, specifically the Testing Program for Antibiotic Resistant Organism (ARO) Algorithm.

The Infection Prevention and Control (IPAC) lead indicated that the home had not been following up on residents that had previously tested positive for MRSA. The IPAC lead indicated that the home had fallen behind on the re-testing of the previously positive residents. They further provided documentation of the 13 residents that had tested positive for MRSA and required follow-up to determine if they were infected or colonized with MRSA.

**Sources:** Resident health records, home's action plan for follow up regarding MRSA, policy and procedures and IPAC lead interview.

[542]

**COMPLIANCE ORDER - CO#001: INFECTION PREVENTION AND CONTROL PROGRAM**

**NC#002 Compliance Order pursuant to FLTCA, 2021, s.154(1)2**

Non-compliance with: O. Reg. 246/22, 102 (12) 3

**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, O. Reg. 246/22, 102 (12) 3.

The licensee shall:

- a) Conduct a documented review to ensure all residents in the home have been offered immunizations in accordance with the publicly funded immunization schedules, and annual immunizations, including COVID-19 vaccinations and boosters,
- b) Develop and implement an auditing process to ensure that all residents in the home and any new admission residents are offered immunizations in accordance with the publicly funded immunization schedules, and annual immunizations, including COVID-19 vaccinations and boosters. The audits must be continued for at least one month post compliance due date to ensure sustainability.
- c) Implement any necessary corrective action to address concerns identified during the auditing process.
- d) Documentation of the audits and corrective action must be maintained.

**Grounds**

The licensee has failed to ensure that the following immunization and screening measures were in place: 3. Residents must be offered immunizations against pneumococcus, tetanus and diphtheria in accordance with the publicly funded immunization schedules posted on the website of the Ministry of Health.

**Rationale and Summary**

The Infection Prevention and Control (IPAC) lead who indicated that the home had not been offering newly admitted residents immunizations, specifically, pneumococcus, tetanus and diphtheria and COVID-19 boosters. The IPAC lead provided a copy of a list of residents that required the mentioned vaccines. It was documented that an indicated number of residents required the TDAP, pneumovax, COVID-19 vaccines as well as the COVID-19 boosters.

A review of the home’s policy titled, “Resident Vaccinations” last reviewed, April 2022 indicated that residents were offered vaccinations to illnesses including pneumonia, tetanus and diphtheria at the time of admission to help minimize the spread of infection.

**Sources:** Resident immunization records, home’s action plan for immunizations, policy and procedures and IPAC lead interview.

**This order must be complied with by** [September 20, 2022](#)

**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 Penalty (AMP) in accordance with section 169 of the *Fixing Long-Term Care Act, 2021* (Act). The

**Ministry of Long-Term Care**  
Long-Term Care Operations Division  
Long-Term Care Inspections Branch

**Sudbury Service Area Office**  
159 Cedar Street, Suite 403  
Sudbury ON P3E 6A5  
Telephone: 1-800-663-6965  
[SudburySAO.moh@ontario.ca](mailto:SudburySAO.moh@ontario.ca)

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. Please include the inspection report # and the order or AMP #;
- (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, 8<sup>th</sup> floor  
Toronto, ON M7A 1N3  
email: [MLTC.AppealsCoordinator@ontario.ca](mailto:MLTC.AppealsCoordinator@ontario.ca)

If service is made by:

- registered mail, is deemed to be made on the fifth day after the day of mailing
- email, is deemed to be made on the following day, if the document was served after 4 p.m.
- 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:

- An order made by the Director under sections 155 to 159 of the Act.
- An AMP issued by the Director under section 158 of the Act.
- 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:



**Ministry of Long-Term Care**  
Long-Term Care Operations Division  
Long-Term Care Inspections Branch

Inspection Report under the  
***Fixing Long-Term Care Act, 2021***

**Sudbury Service Area Office**  
159 Cedar Street, Suite 403  
Sudbury ON P3E 6A5  
Telephone: 1-800-663-6965  
[SudburySAO.moh@ontario.ca](mailto:SudburySAO.moh@ontario.ca)

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

c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Long-Term Care  
438 University Avenue, 8<sup>th</sup> Floor  
Toronto, ON M7A 1N3  
email: [MLTC.AppealsCoordinator@ontario.ca](mailto: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](http://www.hsarb.on.ca).