

# 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: May 6, 2025

**Inspection Number**: 2025-1102-0001

**Inspection Type:**Critical Incident

Licensee: Clurelea Ltd.

Long Term Care Home and City: Good Samaritan Nursing Home, Alliston

### **INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): April 23 - 25, 2025 and May 1, 2, 5 and 6, 2025.

The following intake(s) were inspected:

-Intake: #00139782 related to a respiratory outbreak

-Intake: #00143522 related to an unexpected death.

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

Resident Care and Support Services Infection Prevention and Control

### **INSPECTION RESULTS**

## **WRITTEN NOTIFICATION: Emergency Plans**

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



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Non-compliance with: O. Reg. 246/22, s. 268 (4) 1. vi.

Emergency plans

- s. 268 (4) The licensee shall ensure that the emergency plans provide for the following:
- 1. Dealing with emergencies, including, without being limited to, vi. medical emergencies,

The licensee failed to ensure that the emergency plan for medical emergencies was complied with.

As per O. Reg. 246/22 s. 11(1)(b) 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, program, procedure, strategy, initiative or system, the licensee is required to ensure that the plan, policy, protocol, program, procedure, strategy, initiative or system, is complied with.

A registered staff failed to follow the home's Code Blue-Medical Emergency Policy and Procedure when attending to a resident during a medical emergency.

Sources: resident clinical records, home's investigation notes, Code Blue-Medical Emergency Policy and Procedure; interviews with Personal Support Worker (PSW), Registered Practical Nurse, RN Clinical Nurse Leader, Administrator/Director of Nursing.

### **WRITTEN NOTIFICATION: Emergency Plans**

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

Non-compliance with: O. Reg. 246/22, s. 268 (14) (b)

Emergency plans

s. 268 (14) Every licensee of a long-term care home shall ensure that staff,



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volunteers and students are trained on the emergency plans, (b) at least annually thereafter.

The licensee failed to ensure that staff were trained annually on their Code Blue-Medical Emergency plan.

The home failed to ensure that the registered staff were trained annually on their Code Blue-Medical Emergency plan.

Sources: Code Blue-Medical Emergency Exercise 2024 attendance records; interview with Administrator/Director of Nursing.