

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

Ottawa District

347 Preston Street, Suite 420 Ottawa, ON, K1S 3J4 Telephone: (877) 779-5559 ottawadistrict.mltc@ontario.ca

Original Public Report

Report Issue Date: December 16, 2022 Inspection Number: 2022-1224-0002

Inspection Type:

Critical Incident System

Licensee: Gibson Holdings (Ontario) Ltd.

Long Term Care Home and City: Helen Henderson Nursing Home, Amherstview

Lead Inspector

Anna Earle (740789)

Inspector Digital Signature

Additional Inspector(s)

INSPECTION SUMMARY

The Inspection occurred on the following date(s): December 6, 7, 8 2022

The following intake(s) were inspected:

• Intake: #00013983 [CI: 2728-000005-22] Resident fall with injury

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

Falls Prevention and Management Infection Prevention and Control

INSPECTION RESULTS

WRITTEN NOTIFICATION: Infection Prevention and Control



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

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

The licensee has failed to ensure the infection prevention and control (IPAC) program was complied with regarding the "Infection Prevention and Control (IPAC) Standard for Long Term Care Homes April 2022". IPAC Standard, section 10.4, requires support to be provided to residents in performing hand hygiene prior to receiving meals.

During an observation on December 7, 2022, no hand hygiene was completed for residents prior to the lunch meal service who were dining in the Garden View dining room. RPN indicated that residents are required to complete hand hygiene prior to eating and confirmed that no hand hygiene for residents had been provided prior to the lunch meal on December 7, 2022.

During an interview with RPN and Director of Care on December 7, 2022, it was identified that the process for hand hygiene for residents at mealtime is to use alcohol-based hand rub 70-90% as per policy, prior to meals being served.

The Infection Control Manual, Policy, Section: Infection Control Practices, Topic: Hand Hygiene, Revised: May 2022, details the procedure for how and when hand hygiene is required to be completed for staff members and residents. It indicates residents to complete or assisted to complete hand hygiene before meals, after toileting, before and after activities and whenever they are visibly soiled.

As a result, not completing hand hygiene properly prior to meals increases the risk of transmission of infectious agents and the possibility of resulting in illnesses for residents.

Sources: Dining room observations; Infection Control Manual Policy, Topic: Hand Hygiene, Revised: May 2022, Reviewed December 7, 2022; and interviews with RPN and Director of Care. [740789]



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