

Ministry of Long-Term Care

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

Toronto District

5700 Yonge Street, 5th Floor
Toronto, ON, M2M 4K5
Telephone: (866) 311-8002

Original Public Report

Report Issue Date: December 9, 2024
Inspection Number: 2024-1096-0004
Inspection Type: Critical Incident
Licensee: Heritage Nursing Homes Inc.
Long Term Care Home and City: The Heritage Nursing Home, Toronto

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): November 28-29, 2024 and December 2, 4, 2024

The following intake(s) were inspected:

- Intake: #00129777/Critical Incident (CI) #2582-000023-24 - related to a resident's fall
- Intake: #00131978/CI #2582-000024-24 - related to a disease outbreak

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

- Infection Prevention and Control
- Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Infection prevention and control program

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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)

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).

The licensee has failed to ensure that any standard or protocol issued by the Director with respect to infection prevention and control (IPAC) was implemented.

Additional Requirement 9.1 of the IPAC Standard for Long-Term Care Homes required Routine Practices be followed in the IPAC program. Specifically, s. 9.1 (d) around the proper use of Personal Protective Equipment (PPE), including appropriate selection, application, removal, and disposal.

Rationale and Summary

Before entering a resident's room, a Registered Practical Nurse (RPN) was observed not completing hand hygiene after the removal of their contaminated gloves prior to donning a gown and a new pair of gloves.

The IPAC Lead verified that the RPN should have performed hand hygiene after doffing the gloves prior to donning new PPEs.

Failure to perform hand hygiene after doffing contaminated PPEs increased the risk of infection transmission during an outbreak.

Sources: Observation and interviews with staff.

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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 (9) (b)

Infection prevention and control program

s. 102 (9) The licensee shall ensure that on every shift,

(b) the symptoms are recorded and that immediate action is taken to reduce transmission and isolate residents and place them in cohorts as required. O. Reg. 246/22, s. 102 (9).

The licensee has failed to ensure that on every shift, symptoms indicating the presence of infection in residents are recorded in accordance with any standard or protocol issued by the Director.

Rationale and Summary

Two residents were diagnosed with respiratory infections.

The IPAC Lead indicated that registered nursing staff were to document residents' signs and symptoms of infection on each shift in the progress notes on Point Click Care (PCC).

A review of the residents' clinical records indicated that there were no documentation on PCC to support the monitoring of the residents' signs and symptoms across multiple shifts.

Failure to record symptoms indicating the presence of infection in residents may lead to the home's inability to monitor the health status of residents and intervene appropriately.

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Sources: Residents' clinical records and interview with the IPAC Lead.