

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

Hamilton District

119 King Street West, 11th Floor Hamilton, ON, L8P 4Y7 Telephone: (800) 461-7137

Original Public Report

Report Issue Date: March 1, 2023

Inspection Number: 2023-1561-0001

Inspection Type:

Complaint

Critical Incident System

Licensee: Corporation of the City of Brantford and the Corporation of the County of Brant

Long Term Care Home and City: John Noble Home, Brantford

Lead Inspector

Carol Polcz (156)

Inspector Digital Signature

Carol Polcz, RD

Additional Inspector(s)

Yvonne Walton (169)

INSPECTION SUMMARY

The inspection occurred on the following date(s):

January 17, 18, 20, 23, 24, 25, 27, 30, 31, February 2, 3, 6, 7, 8, 10, 13, 14, 15, 2023. These dates were all on-site.

The following intake(s) were inspected:

- Intake: #00001490 [IL: IL-02260-HA] Complaint regarding abuse and neglect, bathing. See related log #011591-22.
- Intake: #00017461 IL-08907-HA Complaint regarding neglect, plan of care, skin and wound care and hydration.
- Intake: #00003102 [CI: M544-000037-21], Intake: #00006409 [CI: M544-000017-22] and Intake: #00007653 [CI: M544-000019-22] were related to falls.
- The following intakes were included in this inspection: Intake: #00003416 [CI: M544-000034-21], Intake: #00003192 [CI: M544-000031-21], Intake: #00005696 [CI: M544-000038-21] and were related to falls.

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



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Resident Care and Support Services
Skin and Wound Prevention and Management
Food, Nutrition and Hydration
Infection Prevention and Control
Prevention of Abuse and Neglect
Reporting and Complaints
Falls Prevention and Management

INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC # remedied pursuant to FLTCA, 2021, s. 154 (2)

FLTCA, 2021, s. 102

The Infection Prevention and Control (IPAC) Standard (the "Standard") for Long-Term Care Homes is issued by the Director pursuant to section 102(2)(b) of the Regulation under the Fixing Long-Term Care Act, 2021 (the "Act"). The licensee is required to implement any standard or protocol issued by the Director with respect to infection prevention and control. The Act and O. Reg. 246/22, contain requirements related to IPAC and also require the licensee to implement any standard or protocol issued by the Director with respect to IPAC.

The licensee is required to implement a hand hygiene program (s. 23(2)(e) of the Act). The licensee is required to ensure that there is in place a hand hygiene program in accordance with any standard or protocol issued by the Director under s. 102(2) of the Regulation, which includes, at a minimum, access to hand hygiene agents at point-of-care (para 11 of s. 102(7) of the Regulation).

- 10.4 The Licensee failed to ensure that the hand hygiene program also included policies and procedures, as a component of the overall IPAC program,
- c) audits to monitor hand hygiene compliance including feedback and correction of practices when indicated.



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Rationale and Summary:

The IPAC lead reported they did not complete hand hygiene audits at snack time and they did not have an audit available. The IPAC lead created and implemented an audit during the inspection.

Sources:

Interview with the IPAC lead and IPAC standard for Long Term Care Homes (April 2022).

Date Remedy Implemented: February 2, 2023



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