

**Inspection Report under
the Long-Term Care
Homes Act, 2007**

**Rapport d'inspection en vertu de
la Loi de 2007 sur les foyers de
soins de longue durée**

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

**Division des opérations relatives aux
soins de longue durée
Inspection de soins de longue durée**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Jul 24, 2020	2020_520622_0009	007476-20	Critical Incident System

Licensee/Titulaire de permis

0760444 B.C. Ltd. as General Partner on behalf of Omni Health Care Limited Partnership

2020 Fisher Drive Suite 1 PETERBOROUGH ON K9J 6X6

Long-Term Care Home/Foyer de soins de longue durée

Kentwood Park
2 Ontario Street PICTON ON K0K 2T0

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs

HEATH HEFFERNAN (622)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): July 3, 7, 8, 9, 10, 13, 14, 2020 as an off-site inspection.

Critical Incident log #007476-20/Critical Incident System report (CIS) #0893-000004-20, related to staff to resident abuse.

During the course of the inspection, the inspector(s) spoke with the Chief Operating Officer (COO), the Administrator, the Director of Care (DOC), the Office Manager, Registered Nurses (RNs), Personal Support Workers (PSWs), a Health Care Aide (HCA), and the resident.

Also, during the course of the inspection, the inspector reviewed the Critical Incident System report (CIS), electronic health records, hard copy licensee investigation documentation, the licensee's policies #AM-6.9 (Zero Tolerance of Abuse), #AM-6.7 (Reporting Incidents of Abuse) and #IF-OM-4.9 (Management of COVID-19).

**The following Inspection Protocols were used during this inspection:
Infection Prevention and Control
Prevention of Abuse, Neglect and Retaliation**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Légende</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (a requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 229. Infection prevention and control program

Specifically failed to comply with the following:

s. 229. (4) The licensee shall ensure that all staff participate in the implementation of the program. O. Reg. 79/10, s. 229 (4).

Findings/Faits saillants :

1. The licensee shall ensure that the Administrator participates in the implementation of the infection prevention and control program required under subsection 86 (1) of the Act.

On March 17, 2020, the Premier of Ontario and Cabinet issued a COVID-19 emergency in the Province of Ontario under the Emergency Management and Civil Protection Act.

Directive #3 for Long-Term Care Homes under the Long-Term Care Homes Act, 2007 issued on April 8, 2020 by the Chief Medical Officer of Health (CMOH) of Ontario, stated that Long-term care homes must not permit residents to leave the home for short-stay absences and were to be self isolated for 14 days when returning to the home.

The licensee's policy# IF-OM-4.9 - Management of COVID-19 which was dated April 9, 2020 stated under "Procedure":

#46. As per Directive #3 for Long-Term Care Homes under the Long-Term Care Homes Act, 2007, Issued under Section 77.7 of the Health Protection and Promotion Act (HPPA), R.S.O. 1990, c. H.7 have issued required precautions and procedures effective immediately dated April 8, 2020.

#55. The Administrator will read and follow any directive from the Public Health Ontario, Tele-Health or Ministry of Health and Who websites for COVID-19.

Critical Incident System report (CIS) # 0893-000004-20 alleged on a specified date, Administrator #100 took resident #001 from the long-term care home into three separate locations in the community.

Review of the licensee's investigation documents, electronic health records, and interviews with registered staff, non-registered staff, management and resident #001, indicated that despite Administrator #100's knowledge of Directive #3, on the specified date, they had taken resident #001 out of the long-term care home into three separate locations in the community where they had contact with others. After returning to the long-term care home, resident #001 had interacted with staff and residents prior to being swabbed for COVID-19 and placed on 14 days isolation the following afternoon. One day later, Administrator #100 was noted to attempt to take resident #001 and resident #002 out of the long-term care home on two separate occasions but was stopped by staff.

Therefore, the licensee failed to ensure that Administrator #100 participated in the implementation of the infection prevention and control program, when they chose to take resident #001 out of the long-term care home into three separate locations in the community during the COVID-19 pandemic. [s. 229. (4)]

Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance that will ensure that all staff including the Administrator participate in the implementation of the infection prevention and control program,, to be implemented voluntarily.

Issued on this 24th day of July, 2020

Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs

Original report signed by the inspector.