

**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

**Original Public Report**

<b>Report Issue Date:</b> October 9, 2024
<b>Inspection Number:</b> 2024-1003-0002
<b>Inspection Type:</b> Complaint
<b>Licensee:</b> King Nursing Home Limited
<b>Long Term Care Home and City:</b> King Nursing Home, Bolton

**INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): September 25 -27, 2024 and October 1, 2, 4, 2024.

The inspection occurred offsite on the following date(s): October 3, 2024

The following intake(s) were inspected:

- Intake: #00116740 - Concern regarding admission of an applicant.
- Intake: #00121601 - Concerns regarding care of a resident.

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

- Resident Care and Support Services
- Infection Prevention and Control
- Admission, Absences and Discharge

**INSPECTION RESULTS**

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**WRITTEN NOTIFICATION: Infection prevention and control program**

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).

In accordance with the IPAC Standard, revised September 2023, section 7.3, (b), the IPAC Lead shall ensure that audits are performed as required.

Specifically, the licensee has failed to ensure that the IPAC lead has implemented audits, at least quarterly, to confirm that all staff can perform the IPAC skills required of their role.

**Rationale and Summary:**

Infection Prevention and Control (IPAC) Audits, provided by the IPAC lead, included Personal Protective Equipment (PPE) and hand hygiene audits.

The IPAC lead said that they expected a broader staff and shift coverage in the audits.

Additionally, they stated that the audits lacked representation from all disciplines and the PPE audits outside of outbreaks should have been documented and were not.

Failure to conduct IPAC audits to ensure all staff know the skills required of their role, placed the residents and staff at risk of infection transmission.

**Sources:** Review of the home's IPAC audits, interview with IPAC Lead.

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**WRITTEN NOTIFICATION: Approval by licensee**

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

**Non-compliance with: O. Reg. 246/22, s. 179 (3) 1.**

Approval by licensee

s. 179 (3) Subject to subsections (4) and (5), the licensee shall, within five business days after receiving the request mentioned in clause (1) (b), do one of the following:

1. Give the appropriate placement co-ordinator the written notice required under subsection 51 (8) of the Act.

The licensee has failed to within five business days after receiving the request mentioned in clause (1) (b), to give the appropriate placement coordinator the written notice required under subsection 51 (8) of the Act.

**Rational and summary:**

An applicant applied for admission, but their application was not responded to until over a month later.

The Director of Resident and Family Services stated that they should have responded to the application within five business days of receiving it.

Failure to notify the placement coordinator within the time frame could lead to ineffective communication between the long term care home (LTCH), the placement coordinator and the applicant.

**Sources:** Review of the applicant's application and communications with the placement coordinator, interview with Director of Resident and family Services and Director of Care.