

Ministry of Long-Term Care

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

Sudbury Service Area Office 159 Cedar St, Suite 403 Canada, ON, P3E 6A5

Telephone: (800) 663-6965 sudburysao.moh@ontario.ca

Report Issue Date: October 27, 2022 Inspection Number: 2022-1320-0002 Inspection Type: Complaint Critical Incident System Licensee: Orillia Long Term Care Centre Inc. Long Term Care Home and City: Leacock Care Centre, Orillia Lead Inspector Steven Naccarato (744) Additional Inspector(s)

INSPECTION SUMMARY

The Inspection occurred on the following date(s): September 26-29, 2022.

The following intake was inspected:

• An intake related to care concerns of a resident.

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

Food, Nutrition and Hydration Infection Prevention and Control

INSPECTION RESULTS



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WRITTEN NOTIFICATION: Reporting certain matters to Director

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

Non-compliance with: FLTCA, 2021, s. 28 (1) 1.

The licensee has failed to ensure that improper care of a resident was reported immediately to the Director.

Rationale and Summary

The home's management team was aware of improper care of a resident which resulted in harm to the resident.

The incident was reported to the Director several days later.

The home's failure to report improper care of a resident immediately to the Director caused minimal risk.

Sources: The critical Incident report; and an interview with the Administrator. [744]

COMPLIANCE ORDER CO #001 Dining and snack service

NC #002 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O.Reg. 246/22, s. 79 (1) 4.

The Inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:

The Licensee has failed to comply with O.Reg. 246/22, s. 79 (1) 4.

The Licensee shall:

- 1. Develop and implement an auditing process to ensure that staff assisting residents are aware of the residents' diets, special needs and preferences, including ensuring the availability of a current master diet list or functioning Point of care (POC) tablet on the snack cart. Documentation of the auditing process must be maintained, and the audits must continue for at least one month post the compliance due date to ensure sustainability.
- 2. Implement and evaluate any corrective actions required to address any identified deficiencies during the audits. Documentation of the corrective action must be maintained.

Grounds



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The licensee has failed to ensure that staff assisting a resident was aware of the resident's diet.

In accordance with O. Reg 246/22 s. 11 (1) (b), the licensee is required to implement a process to ensure that staff assisting residents are aware of the residents' diets, special needs and preferences, and this must be complied with.

Specifically, staff did not comply with the home's policies that were part of the licensee's Nutrition and Hydration Program.

A staff member was not aware of a resident's diet, and the resident was served the incorrect diet texture. During the inspection, the Inspector observed that staff continued to have difficulty accessing the residents' diet information.

Sources: A resident's health care records; the home's internal investigation notes and policies; Inspector's observations; and interviews with the Administrator and other staff.

[744]

This order must be complied with by November 25, 2022



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REVIEW/APPEAL INFORMATION

TAKE NOTICE

The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

Director

c/o Appeals Coordinator Long-Term Care Inspections Branch Ministry of Long-Term Care 438 University Avenue, 8th floor Toronto, ON, M7A 1N3

e-mail: MLTC.AppealsCoordinator@ontario.ca

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document



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If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

Health Services Appeal and Review Board

Attention Registrar 151 Bloor Street West, 9th Floor Toronto, ON, M5S 1S4

Director

c/o Appeals Coordinator Long-Term Care Inspections Branch Ministry of Long-Term Care 438 University Avenue, 8th Floor Toronto, ON, M7A 1N3

e-mail: MLTC.AppealsCoordinator@ontario.ca

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website www.hsarb.on.ca.