

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

Ottawa District 347 Preston Street, Suite 410 Ottawa, ON, K1S 3J4 Telephone: (877) 779-5559

Public Report

Report Issue Date: December 12, 2024

Inspection Number: 2024-1352-0004

Inspection Type:

Complaint

Critical Incident

Follow up

Licensee: CVH (No. 4) LP by its general partner, Southbridge Care Homes (a limited partnership, by its general partner, Southbridge Health Care GP Inc.) Long Term Care Home and City: Manoir Marochel, Ottawa

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): November 28 and 29, 2024, and December 2, 3, 4, 5, 6, 9 and 10, 2024.

The following intake(s) were inspected:

- Intake: #00129050 was Follow-up #: 2 to Compliance Order (CO) #001 issued in inspection #2024-1352-0002, related to O. Reg. 246/22, s. 48, Availability of Supplies, with a Compliance Due Date (CDD) of August 30, 2024, Re-Inspection Fee \$500.
- Intake: #00129856 was a complaint related to staffing.
- Intake: #00131257 / Critical Incident System report 2867-000019-24 was related to an allegation of resident to resident abuse.



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Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2024-1352-0002 related to O. Reg. 246/22, s. 48.

The following Inspection Protocols were used during this inspection:

Housekeeping, Laundry and Maintenance Services Infection Prevention and Control Prevention of Abuse and Neglect Responsive Behaviours Staffing, Training and Care Standards

INSPECTION RESULTS

WRITTEN NOTIFICATION: 24-hour Nursing Care

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

Non-compliance with: FLTCA, 2021, s. 11 (3)

Nursing and personal support services

s. 11 (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations.

The licensee has failed to ensure that at least one registered nurse (RN) who was both an employee of the licensee and a member of the regular nursing staff of the home was on duty and present in the home at all times, for several full and partial shifts, during the last three months.



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Sources: Interviews with staff and review of the home's staffing schedules and staffing contingency plan.

WRITTEN NOTIFICATION: Posting of Information

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

Non-compliance with: O. Reg. 246/22, s. 265 (1) 9. ii.

Posting of information

s. 265 (1) For the purposes of clause 85 (3) (s) of the Act, every licensee of a long-term care home shall ensure that the information required to be posted in the home and communicated to residents under section 85 of the Act includes the following:
9. Direct contact information, including a telephone number and email address that are monitored regularly for,

ii. the Director of Nursing and Personal Care.

The licensee has failed to ensure that the information required to be posted and communicated to residents, for the purposes of clause 85 (3) (s) of the Act, included direct contact information, including a telephone number and email address that was monitored regularly for the Director of Nursing and Personal Care (DONPC), as throughout the course of the inspection, the information board listed the name of the previous DONPC. Their telephone number was provided, but an email address was not posted. The information was changed to identify the LTC Clinical Consultant as the contact person in the absence of a DONPC. Their telephone number was provided, but an email address was not posted.

Source: The information board.



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NOTICE OF RE-INSPECTION FEE Pursuant to section 348 of O. Reg. 246/22 of the Fixing Long-Term Care Act, 2021,the licensee is subject to a re-inspection fee of \$500.00 to be paid within 30 days from the date of the invoice. A re-inspection fee applies since this is, at minimum, the second follow-up inspection to determine compliance with the following Compliance Order(s) under s. 155 of the FLTCA, 2021, and/or s. 153 of the LTCHA, 2007. A Re-Inspection Fee was applicable as this was Follow-up #2 to Compliance Order

#001 issued in inspection #2024-1352-0002. Follow-up #2 to Compliance Order 00119685 in #2024-1352-0003, was not complied.

Licensees must not pay a Re-Inspection Fee from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the Re-Inspection Fee.