Ontario

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

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# Original Public Report

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| Report Issue Date: July 19, 2024 |
| Inspection Number: 2024-1571-0004 |
| Inspection Type:<br>Critical Incident |
| Licensee: The Corporation of the County of Prince Edward |
| Long Term Care Home and City: H.J. McFarland Memorial Home, Picton |

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): July 12, 15-19, 2024

The following intake(s) were inspected:

- Intake: #00119472 - CI #M556-000022-24 - Incident resulting in resident transferred to hospital.

The following Inspection Protocols were used during this inspection:

Food, Nutrition and Hydration
Infection Prevention and Control

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Plan of care

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: FLTCA, 2021, s. 6 (1) (c)
Plan of care
s. 6 (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,
(c) clear directions to staff and others who provide direct care to the resident; and

The licensee has failed to ensure a resident's nutritional plan of care provided clear direction related to close monitoring of the resident while eating.

Sources: Resident's care plan, progress notes, Kardex and dietary assessments in PCC, the unit's nutritional Kardex, interviews with the DOC, the Nutritional Supervisor, two RPN's, and two PSW's.

## WRITTEN NOTIFICATION: Infection prevention and control program

NC #002 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).

The licensee has failed to ensure that a standard issued by the Director with respect to infection prevention and control was complied with. In accordance with

requirement 10.2 (c) under the Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes (issued April 2022 and revised September 2023), the licensee has failed to ensure that the hand hygiene program for residents included assistance to perform hand hygiene before a meal.

Sources: Observations of hand hygiene opportunities.

The licensee has failed to ensure that a standard issued by the Director with respect to infection prevention and control was complied with. In accordance with additional requirement 9.1 (b) under the Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes (issued April 2022 and revised September 2023), the licensee has failed to ensure that Routine Practices were followed in the IPAC program, specifically related to the completion of staff hand hygiene during a resident meal service.

Sources: Observations of hand hygiene opportunities.

## WRITTEN NOTIFICATION: Emergency plans

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246 / 22, s. 268 (4) 1. vi.
Emergency plans
s. 268 (4) The licensee shall ensure that the emergency plans provide for the following:
1. Dealing with emergencies, including, without being limited to,

vi. medical emergencies,

The licensee has failed to ensure the licensee's medical emergency policy was complied with at the time of an incident involving a resident.

In accordance with O. Reg. 246/22 s. 11 (1) b, the licensee is required to ensure that written policies and protocols were developed for the emergency plans and ensure they were complied with.

Specifically, staff did not comply with the licensee's "Management of a choking resident protocol" when they utilized equipment that was not included in the protocol.

Sources: Resident's progress notes, Dysphagia Management Policy- VII-I-10.80, Management of a choking resident protocol - XVIII-10.00(c), interviews with the DOC, two RPN's, and a PSW.