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

Hamilton District
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Public Report

Report Issue Date: January 20, 2025
Inspection Number: 2025-1118-0001
Inspection Type: Critical Incident
Licensee: Niagara Health System
Long Term Care Home and City: Niagara Health System, Welland Hospital Site, Extended Care Unit, Welland

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): January 16, 17, 2025.

The following intake(s) were inspected:

- Intake: #00124277 - Critical Incident System (CIS) #2607-000016-24 - related to falls prevention and management.

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

Infection Prevention and Control
Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Falls prevention and management

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

Non-compliance with: O. Reg. 246/22, s. 54 (2)
Falls prevention and management
s. 54 (2) Every licensee of a long-term care home shall ensure that when a resident has fallen, the resident is assessed and that a post-fall assessment is conducted using a clinically appropriate assessment instrument that is specifically designed for falls. O. Reg. 246/22, s. 54 (2); O. Reg. 66/23, s. 11.

The licensee has failed to ensure that when a resident fell, a post-fall assessment was conducted using a clinically appropriate assessment instrument.

A CIS and the resident's clinical records indicated a resident had a fall that resulted in injury. A review of the resident's records as well as interviews, indicated a post-fall assessment had not been conducted for this fall.

Source: A critical incident report, the resident's clinical records, and interviews with the Director of Care and others.

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 the Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes was implemented.

The home was to ensure that audits were performed regularly to ensure that all staff could perform the IPAC skills required of their role. Record reviews and interviews confirmed that with exception to completing staff audits for personal protective equipment and hand hygiene, audits had not been developed to ensure all staff could perform the IPAC skills required of their role.

Sources: Review of IPAC audits and interview with the IPAC Lead.