

Ministry of Long-Term Care

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

North District

159 Cedar St, Suite 403
Sudbury, ON, P3E 6A5
Telephone: (800) 663-6965

Original Public Report

Report Issue Date: March 14, 2024	
Inspection Number: 2024-1283-0001	
Inspection Type: Follow up	
Licensee: Nipigon District Memorial Hospital	
Long Term Care Home and City: Nipigon District Memorial Hospital, Nipigon	
Lead Inspector Lauren Tenhunen (196)	Inspector Digital Signature

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: February 26 and 29, 2024, and off site on February 27, 2024.

The following intake was inspected:

- One Intake regarding a Follow-up #001 from inspection #2023-1283-0003, related to O. Reg. 246/22 - s. 55 (2) (b) (ii).

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

- Skin and Wound Prevention and Management
- Infection Prevention and Control

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Licensee must comply

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

Non-compliance with: FLTCA, 2021, s. 104 (4)

Conditions of licence

s. 104 (4) Every licensee shall comply with the conditions to which the licence is subject.

The licensee has failed to comply with Compliance Order (CO) #001 from Inspection #2023_1283_0003 served on December 20, 2023, with a compliance due date of February 6, 2024.

The required auditing process for residents with altered skin integrity was not developed, fully implemented and documented, as specified in the compliance order.

Rationale and Summary

The Assistant Director of Care (ADOC) provided the home's audit tool titled, "Long-Term Care Wound and Skin Tear Tracker", for a five week time period.

The tool did not include information which would indicate the residents' treatment orders were up to date, were being followed, or the corrective action taken if concerns had been identified during the auditing process.

Sources: Review of CO #001 from inspection #2023_1283_0003; the home's audit tool titled, "Long-Term Care Wound and Skin Tear Tracker", week one through five; interviews with the Administrator, Chief Nursing Executive (CNE), Nurse Manager

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(DOC), and the ADOC. [196]

An Administrative Monetary Penalty (AMP) is being issued on this written notification AMP #001

NOTICE OF ADMINISTRATIVE MONETARY PENALTY (AMP)

The Licensee has failed to comply with FLTCA, 2021

Notice of Administrative Monetary Penalty AMP #001

Related to Written Notification NC #001

Pursuant to section 158 of the Fixing Long-Term Care Act, 2021, the licensee is required to pay an administrative penalty of \$1100.00, to be paid within 30 days from the date of the invoice.

In accordance with s. 349 (6) and (7) of O. Reg. 246/22, this administrative penalty is being issued for the licensee's failure to comply with an order under s. 155 of the Act.

Compliance History:

The licensee failed to comply with the conditions to which the licence was subject.

This is the first AMP that has been issued to the licensee for failing to comply with this requirement.

Invoice with payment information will be provided under a separate mailing after service of this notice.

Licensees must not pay an AMP 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

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licensee is attesting to using funds outside a resident-care funding envelope to pay the AMP.