Ontario

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

Inspection Report Under the
Fixing Long-Term Care Act, 2021

Hamilton District
119 King Street West, 11th Floor
Hamilton, ON, L8P 4Y7
Telephone: (800) 461-7137
hamiltondistrict.mltc@ontario.ca

Original Public Report

Report Issue Date: December 28, 2022	
Inspection Number: 2022-1605-0001	
Inspection Type: Critical Incident System	
Licensee: The Regional Municipality of Niagara	
Long Term Care Home and City: Northland Pointe, Port Colborne	
Lead Inspector Sydney Withers (740735)	**Inspector Digital Signature**
Additional Inspector(s) Jobby James (694267) was on-site during this inspection.	

INSPECTION SUMMARY

The Inspection occurred on the following date(s):
November 23-25, 28, 2022

The following intake(s) were inspected:
- Intake: #00001107 was related to falls prevention and management.

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

Infection Prevention and Control
Falls Prevention and Management

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INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)
O. Reg. 246/22, s. 268 (4) 3.

The licensee has failed to ensure that the hand hygiene products within the home have not expired.

Rationale and Summary
On a date in November 2022, during an Infection Prevention and Control (IPAC) tour of the home, an expired hand pump alcohol-based hand rub (ABHR) was observed being used by staff to provide resident hand hygiene in a resident home area (RHA) dining room during lunch service. The ABHR hand pump was removed from the RHA by the inspector following the observation and provided to the IPAC Lead to be discarded. The IPAC Lead confirmed the ABHR was expired.

The following day, the IPAC Lead stated that a sweep of the home was underway to ensure no further expired ABHR was present in the home. No additional expired ABHR was identified by the IPAC Lead or during observations of the other RHA dining rooms by inspector.

There was minimal risk to residents as the additional ABHR wipes, hand pumps and wall-mounted dispensers available in the dining area did not contain expired sanitizer.

Sources
ABHR observation in November 2022; and interview with IPAC Lead.

[740735]

Date Remedy Implemented: November 24, 2022

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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)

The licensee has failed to ensure any standard or protocol issued by the Director with respect to infection prevention and control was implemented.

The Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes indicated under section 9.1 that additional precautions were to be followed in the IPAC program which included (f) the appropriate selection, application, removal and disposal of personal protective equipment (PPE).

Rationale and Summary
On a date in November 2022, additional precaution signage for a resident room indicated droplet/contact precautions were in place. A Personal Support Worker (PSW) was observed entering the room without donning the required PPE as per the additional precaution signage. In an interview, the same PSW confirmed the expectation for PPE to be donned in a contact/droplet precaution room including gown, gloves, face shield and mask. They stated they did not don the required PPE prior to entering the resident's room.

The residents in this home area were at an increased risk of acquiring infection, as the staff member was observed providing care to other residents after entering and exiting an additional precaution room without the required PPE.

Sources
Resident clinical records; IPAC Standard for Long-Term Care Homes (April 2022); resident room observation; and interview with PSW.

[740735]