

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: February 3, 2025

Inspection Number: 2025-1604-0001

Inspection Type:
Complaint

Licensee: City of Ottawa

Long Term Care Home and City: Peter D. Clark Centre, Ottawa

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): January 30 and 31, 2025

The following complaint intake(s) were inspected:

- Intake #00137368 related to infection prevention and control, staffing, and resident care

The following Inspection Protocols were used during this inspection:

Resident Care and Support Services
Infection Prevention and Control
Safe and Secure Home
Staffing, Training and Care Standards

INSPECTION RESULTS

WRITTEN NOTIFICATION: Doors in a Home

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

Non-compliance with: O. Reg. 246/22, s. 12 (1) 3.

Doors in a home

s. 12 (1) Every licensee of a long-term care home shall ensure that the following rules are complied with:

3. All doors leading to non-residential areas must be equipped with locks to restrict unsupervised access to those areas by residents, and those doors must be kept closed and locked when they are not being supervised by staff.

The licensee has failed to ensure that all doors leading to non-residential areas were kept closed and locked when not being supervised by staff.

Specifically, the soiled utility and housekeeping rooms on a specific unit were open and the area was not supervised by staff.

Sources: Observations on January 31, 2025; and interview with housekeeper #105, and Manager of Resident Care #102.

WRITTEN NOTIFICATION: CMOH and MOH

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

Non-compliance with: O. Reg. 246/22, s. 272

CMOH and MOH

s. 272. Every licensee of a long-term care home shall ensure that all applicable directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health or a medical officer of health appointed under the Health Protection and Promotion Act are followed in the home.

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The Licensee has failed to ensure that all alcohol-based hand rubs (ABHR) being used for hand hygiene were not expired as recommended by the Chief Medical Officer of Health (CMOH). Specifically, the Ministry of Health's Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings, 2024 directive specifies that the ABHR must not be expired. The ABHR at the entrance of a resident's room was noted to be expired.

Sources: Observations on January 30, and 31, 2025; interview with IPAC Lead #103; and the Ministry of Health's Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings, 2024.