

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

Amended Public Report Cover Sheet (A1)

Amended Report Issue Date: March 20, 2024	
Original Report Issue Date: August 15, 2023	
Inspection Number: 2023-1577-0003 (A1)	
Inspection Type: Complaint Follow up	
Licensee: United Counties of Prescott and Russell	
Long Term Care Home and City: Residence Prescott et Russell, Hawkesbury	
Amended By Maryse Lapensee (000727)	Inspector who Amended Digital Signature

AMENDED INSPECTION SUMMARY

This report has been amended to:
Changed legislation O. Reg 246/22 s. 102 (15) 1 to O. Reg 246/22 s. 102 (15) 2 for
Non-compliance #002.

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Lead Inspector Maryse Lapensee (000727)	Additional Inspector(s) Joelle Taillefer (211)
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INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): August 8, 9, 10, 11, 2023

The following intake(s) were inspected:

- Intake: #00090964 - Follow-up to O. Reg. 246/22 - s. 140 (2) related to Medication Administration
- Intake: #00090966 - Follow-up to FLTCA, 2021 - s. 6 (7) related to Plan of Care
- Intake: #00093653 and Intake: #00094182 - related to a complaint of Nursing and Personal Support Services

Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #002 from Inspection #2023-1577-0001 related to O. Reg. 246/22, s. 140 (2) inspected by Joelle Taillefer (211)

Order # from Inspection #2023-1577-0001 related to FLTCA, 2021, s. 6 (7) inspected by Maryse Lapensee (000727)

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

Medication Management
Infection Prevention and Control
Responsive Behaviours
Staffing, Training and Care Standards

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AMENDED INSPECTION RESULTS

WRITTEN NOTIFICATION: 24-hours Nursing Care

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

Non-compliance with: FLTCA, 2021, s. 11 (3)

Nursing and personal support services

s. 11 (3) Every licensee of a long-term care home shall ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home is on duty and present in the home at all times, except as provided for in the regulations.

The licensee has failed to ensure that at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the home was on duty and present in the home at all times, except as provided for in the regulations.

Rational and Summary:

Record review of the Registered Nursing staffing schedule and interview with the Scheduling Technician indicated that at least one registered nurse was not present in the home on the following night shifts:

One night from 2300 hours to 0430 hours,

Six nights from 2300 hours to 0700 hours.

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As such, there was a potential risk for the residents' health and safety as no Registered Nurses were on site in case of an emergency.

Sources: Review of the Registered Nursing staffing schedule and interview with the Scheduling Technician. [211]

(A1)

The following non-compliance(s) has been amended: NC #002

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 (15) 2.

Infection prevention and control program

s. 102 (15) Subject to subsection (16), every licensee of a long-term care home shall ensure that the infection prevention and control lead designated under this section works regularly in that position on site at the home for the following amount of time per week:

2. In a home with a licensed bed capacity of more than 69 beds but less than 200 beds, at least 26.25 hours per week.

The licensee has failed to ensure that the infection prevention and control lead designated under this section works regularly in that position on site at the home for the following amount of time per week: In a home with a licensed bed capacity of

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more than 69 beds but less than 200 beds, at least 26.25 hours per week.

Rationale and Summary:

Record review of the "Plan et Programme de Prevention des Infections" doesn't identify the Infection Prevention and Control (IPAC) Lead of the home.

Interview with Nursing Supervisor and Assistant Director of Care confirmed that IPAC lead was the Director of Care and didn't have assigned hours for IPAC.

As such there was a potential risk for the resident health and safety as IPAC lead was not assigned designated hours on IPAC.

Sources: review IPAC policy and Interview with Nursing Supervisor and Assistant Director of Care. [000727]