

**Ministry of Long-Term Care**

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

**Central West District**

609 Kumpf Drive, Suite 105  
Waterloo, ON, N2V 1K8  
Telephone: (888) 432-7901

## Original Public Report

**Report Issue Date:** November 14, 2023

**Inspection Number:** 2023-1020-0006

**Inspection Type:**

Follow up

**Licensee:** Sharon Farms & Enterprises Limited

**Long Term Care Home and City:** Strathcona Long Term Care, Mount Forest

**Lead Inspector**

Bernadette Susnik (120)

**Inspector Digital Signature**

**Additional Inspector(s)**

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): September 27, 28, 2023

The inspection occurred offsite on the following date(s): September 29, 2023, and October 25, 2023

The following intake(s) were inspected:

- Intake: #00093740 - Follow-up #: 1 - O. Reg. 246/22 - s. 23.1 (3) 1.

## Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found **NOT** to be in compliance:

Order #001 from Inspection #2023-1020-0004 related to O. Reg. 246/22, s. 23.1 (3) 1. inspected by Bernadette Susnik (120)

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

Infection Prevention and Control  
Safe and Secure Home

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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)

The licensee has failed to comply with the conditions to which the licence was subject, specifically with compliance Order (CO) #001 from inspection 2023-1020-0004 (A1) served on August 9, 2023, with a compliance due date of September 1, 2023. The conditions required the licensee to take actions to ensure that air conditioning was operating in resident rooms when needed to maintain the temperature at a comfortable level for residents between May 15 and September 15, on any day when the indoor air temperatures reached 26 degrees Celsius (°C) at any point during the day.

**Rationale and Summary**

The licensee was required to document and take action when the air temperature in resident rooms was recorded to be 26°C or higher between August 9 and September 15, 2023. The temperature logs reviewed included actions taken when the temperature reached 27°C, and not 26°C.

The licensee was required to document in the resident's progress notes when a supplemental portable air conditioning unit was installed or uninstalled in a resident's room and the reasons why. The resident's plan of care was also to include that an air conditioner was installed in their room and why and include any operational directions for staff to follow regarding its use where necessary. When reviewed during the inspection, the plan of care for five residents who had received the supplemental air conditioning units failed to include that they had a unit in their room and why. For all but one resident, progress notes did not include when air conditioning units were installed.

**Sources:** Review of air temperature logs for September 2023, residents' progress notes and plan of care, interview with Director of Care and Director of Environmental Services.

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

**NOTICE OF ADMINISTRATIVE MONETARY PENALTY (AMP)**

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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:**

A Compliance Order (CO) #001 was previously issued under Inspection 2023-1020-0004 (A1) served on August 9, 2023, with a compliance due date of September 1, 2023.

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

**WRITTEN NOTIFICATION: Minister's Directive****NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.**

Non-compliance with: FLTCA, 2021, s. 184 (3)

The Licensee failed to comply with the Minister's Directive: Covid-19 response measures for long-term care homes, effective August 30, 2022 related to the frequency of Infection Prevention and Control (IPAC) audits.

**Rationale and Summary**

In accordance with the Minister's Directive: Covid-19 response measures for long-term care homes, effective August 30, 2022, the licensee was required to conduct regular IPAC audits in accordance with the COVID-19 Guidance Document for Long-Term Care Homes in Ontario, updated June 26, 2023. This guidance document identified that long-term care homes were to complete IPAC audits weekly during an outbreak. The home was in a respiratory outbreak from September 12, to 27, 2023 and no IPAC

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audits were completed.

**Sources:** Record review of the licensee's IPAC audits, review of the Minister's Directive: COVID-19 response measures for long-term care homes, COVID-19 guidance document for long-term care homes in Ontario; Interview with the Infection Control Lead.

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