

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

Ministry of Long-Term Care

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

Hamilton District

119 King Street West, 11th Floor Hamilton, ON, L8P 4Y7 Telephone: (800) 461-7137

Original Public Report

Report Issue Date: November 4, 2024

Inspection Number: 2024-1505-0006

Inspection Type:

Follow up

Licensee: Shalom Manor Long Term Care Home

Long Term Care Home and City: Shalom Manor Long Term Care Home, Grimsby

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): October 29 - 30, 2024

The following intake(s) were inspected:

- Intake: #00122690 Follow-up #1 CO #001/[2024_1505_0002], related to O. Reg. 246/22 s. 102 (12) 4, Infection Prevention and Control - CDD: September 6, 2024
- Intake: #00122691 Follow-up #1 CO #002/[2024_1505_0002], related to O. Reg. 246/22 s. 252 (3), Vulnerable Sector Checks - CDD: September 6, 2024

Previously Issued Compliance Order(s)

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

Order #002 from Inspection #2024-1505-0002 related to O. Reg. 246/22, s. 252 (3)



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

Order #001 from Inspection #2024-1505-0002 related to O. Reg. 246/22, s. 102 (12) 4.

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

Safe and Secure Home

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 #2024_1505_0002 served on July 29, 2024, with a compliance due date (CDD) of September 6, 2024.

The home did not accurately complete part C of CO #001, related to auditing all staff pursuant to a contract to ensure they had valid negative tuberculosis screening.

Sources: Interview with the DOC, the home's Training, Orientation and Screening Program Policy, OO-05-05-01 (revised Sept 5, 2024)



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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:

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 Ii.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.