

**Inspection Report under
the Long-Term Care
Homes Act, 2007**

**Rapport d'inspection en vertu de
la Loi de 2007 sur les foyers de
soins de longue durée**

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

**Division des opérations relatives aux
soins de longue durée
Inspection de soins de longue durée**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Aug 4, 2021	2021_617148_0017	001269-21, 001270-21	Follow up

Licensee/Titulaire de permis

Mohawk Council of Akwesasne
P.O. Box 579 Cornwall ON K6H 5T3

Long-Term Care Home/Foyer de soins de longue durée

Tsiionkwanonhsote
70 Kawehnoke Apartments Road Akwesasne ON K6H 5R7

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs

AMANDA NIXON (148)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

This inspection was conducted on the following date(s): July 19, 20, 22 and 23, 2021

This inspection was to follow up on two Compliance Orders (CO); Log #001269-21 (CO #002) related to the development and use of standardized recipes and production sheets as directed by the planned menu and Log #001270-21 (CO #003) related to the process to ensure that staff are aware of resident's dietary needs.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, Resident Assessment Instrument (RAI) Coordinator and Infection Control Designate, Registered Nurses, Registered Practical Nurses, Personal Support Workers, Food Service Workers, Housekeeping Aide, Maintenance Staff and residents.

In addition, the Inspector reviewed resident records, documents related to the food service and production system and observed meal services and infection control practices.

The following Inspection Protocols were used during this inspection:

Dining Observation

Infection Prevention and Control

Safe and Secure Home

During the course of this inspection, Non-Compliances were issued.

2 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

The following previously issued Order(s) were found to be in compliance at the time of this inspection:

Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:

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REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
O.Reg 79/10 s. 72. (2)	CO #002	2020_617148_0016		148
O.Reg 79/10 s. 73. (1)	CO #003	2020_617148_0016		148

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Légende
<p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (a requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

**WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 21. Air temperature
Specifically failed to comply with the following:**

**s. 21. (2) Every licensee of a long-term care home shall ensure that the
temperature is measured and documented in writing, at a minimum in the
following areas of the home:**

- 1. At least two resident bedrooms in different parts of the home. O. Reg. 79/10, s. 21 (2).**
- 2. One resident common area on every floor of the home, which may include a lounge, dining area or corridor. O. Reg. 79/10, s. 21 (2).**
- 3. Every designated cooling area, if there are any in the home. O. Reg. 79/10, s. 21 (2).**

Findings/Faits saillants :

1. The licensee has failed to ensure that the temperature was measured and documented in writing, in the required areas of the home.

As of July 20, 2021, there were no measurements or documentation of air temperatures in the home.

Sources: Interviews with Administrator, Director of Care and Maintenance Staff #110. [s. 21. (2)]

Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that air temperatures are measured and documented in writing as required, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with O.Reg 79/10, s. 229. Infection prevention and control program

Specifically failed to comply with the following:

s. 229. (4) The licensee shall ensure that all staff participate in the implementation of the program. O. Reg. 79/10, s. 229 (4).

Findings/Faits saillants :

1. The licensee has failed to ensure that staff participate in the implementation of the infection prevention and control (IPAC) program .

As described by the home's infection prevention and control program, resident's who are newly admitted to the home are to have contact precautions implemented until three negative swabs are obtained for the detection of methicillin-resistant staphylococcus aureus (MRSA) and vancomycin-resistant enterococci (VRE).

A newly admitted resident did not have contact precautions in place as required. A housekeeping aide and personal support worker were unaware of the resident's requirement for contact precautions.

Sources: Observations of infection control practices for the resident and interview with Infection Control Designate. [s. 229. (4)]

Issued on this 4th day of August, 2021

Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs

Original report signed by the inspector.