

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

### Original Public Report

Report Issue Date: October 23, 2024

Inspection Number: 2024-1046-0005

Inspection Type:

Complaint

Licensee: Heartwood Operating Inc.

Long Term Care Home and City: Heartwood, Cornwall

### **INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): October 16-18, 21-23, 2024

The following intake(s) were inspected:

- Intake: #00120973 was a complaint related to concerns with skin and wound care.
- Intake: #00128519 was a complaint related to available and accessible continence care products.

The following Inspection Protocols were used during this inspection:

Skin and Wound Prevention and Management Continence Care Infection Prevention and Control



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### **INSPECTION RESULTS**

### COMPLIANCE ORDER CO #001 Skin and wound care

NC #001 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2. Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (ii) Skin and wound care

- s. 55 (2) Every licensee of a long-term care home shall ensure that,
- (b) a resident exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds,
- (ii) receives immediate treatment and interventions to reduce or relieve pain, promote healing, and prevent infection, as required,

The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:

The licensee shall:

- A) Provide education to all registered staff on the early detection of signs and symptoms of wound infection.
- B) Educate all registered staff on when a resident requires a transfer to an external wound care consultation.
- C) Develop and complete a once weekly audit on all residents with signs and symptoms of wound infection, and of immediate action taken. The audits shall be completed for at least four weeks and until consistent compliance is achieved.
- D) A record must be kept of everything required under (A), (B), and (C), including the date that the education was provided, the name of the registered staff, and the title



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and content of the education resource(s) used for the training, until the Ministry of Long-Term Care has determined the licensee has complied with this order.

#### Grounds

The licensee has failed to ensure that a resident's pressure injury received immediate treatment and interventions to reduce, promote healing, and prevent infection.

A resident was identified to have a pressure injury and the resident's pressure injury deteriorated with signs and symptoms of infection. Weekly skin and wound assessments showed significant decline and worsening pressure injury. During an interview with staff, they acknowledged that the home's process included transfer of a resident to the hospital for external wound care consultation when the plan of care interventions are ineffective, and the pressure injury is worsening. The resident did not have immediate treatment and interventions to promote healing and prevent further infection.

Sources: Resident's clinical records, and interviews with staff.

This order must be complied with by November 25, 2024

An Administrative Monetary Penalty (AMP) is being issued on this compliance order 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 Compliance Order CO #001



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Pursuant to section 158 of the Fixing Long-Term Care Act, 2021, the licensee is required to pay an administrative penalty of \$5500.00, 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 a requirement, resulting in an order under s. 155 of the Act and during the three years immediately before the date the order under s. 155 was issued, the licensee failed to comply with the same requirement.

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 [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.



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# REVIEW/APPEAL INFORMATION

TAKE NOTICEThe Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th floor
Toronto, ON, M7A 1N3



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e-mail: MLTC.AppealsCoordinator@ontario.ca

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:



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Health Services Appeal and Review Board Attention Registrar 151 Bloor Street West, 9<sup>th</sup> Floor Toronto, ON, M5S 1S4

Director
c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8<sup>th</sup> Floor
Toronto, ON, M7A 1N3

e-mail: <u>MLTC.AppealsCoordinator@ontario.ca</u>

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website <a href="https://www.hsarb.on.ca">www.hsarb.on.ca</a>.