

**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**

<b>Report Issue Date:</b> October 5, 2023	
<b>Inspection Number:</b> 2023-1250-0008	
<b>Inspection Type:</b> Complaint	
<b>Licensee:</b> Bruyère Continuing Care Inc.	
<b>Long Term Care Home and City:</b> Élisabeth-Bruyère Residence, Ottawa	
<b>Lead Inspector</b> Linda Harkins (126)	<b>Inspector Digital Signature</b>
<b>Additional Inspector(s)</b>	

**INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): September 26, 27, 28, 29, 2023 and October 3, 2023.

The following intake(s) were inspected:

- Intake: #00095165 and #00095861, complaints related to resident's care and services
- Intake: #00095917 complaint related to laundry services

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

- Resident Care and Support Services
- Housekeeping, Laundry and Maintenance Services
- Food, Nutrition and Hydration
- Infection Prevention and Control

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## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Laundry service

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

Non-compliance with: O. Reg. 246/22, s. 95 (1) (a) (ii)

The licensee has failed to ensure that procedures were developed and implemented related to the laundry program, more specifically for residents' personal items and clothing to be labelled in a dignified manner within 48 hours of admission and of acquiring new clothing.

#### Rationale and Summary

Interview with staff members, who indicated that a Clothing Identification Form was filled out for new resident's clothing and was put in a bag in a designated area for pick up by Supply Processing Distribution (SPD) every Wednesday. One specific staff member indicated that it could take up to 1-2 weeks to receive the labeled clothing.

Interview held with a staff member, who indicated that laundry services is one of the portfolios they are managing and there was no procedure available for clothing labeling and that the labelling of the new clothing was not done within 48 hours. The staff member indicated that there was a pickup of clothing to be labeled twice a week but could not provide specific days.

Inspector # 126 reviewed Clothing Identification Forms for several residents and noted that the labelling of the resident's clothing was not done within 48 hours for more than one resident.

Sources; Interviews with staff members and Clothing Identification Forms.

[126]

### WRITTEN NOTIFICATION: Laundry service

**NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.**

Non-compliance with: O. Reg. 246/22, s. 95 (1) (a) (iii)

The licensee has failed to ensure that procedures were developed and implemented related to the laundry program, more specifically for collecting, sorting, cleaning and delivering resident's clothing.

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#### Rationale and Summary

Interview held with a staff member who indicated that there was no procedure developed or implemented related to the laundry services process.

Interviews held with staff members who shared some inconsistencies about the laundry process and specific role and responsibilities, not being consistent with who does what and how it is done. Those staff were unable to provide procedures related to the laundry program.

Sources: Interviews with staff members and lack of documentation of Laundry Program and relevant policy and procedure.

[126]

## WRITTEN NOTIFICATION: Laundry service

### NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 95 (1) (a) (iv)

The licensee has failed to ensure that procedures were developed and implemented related to the laundry program, more specifically the process to report and locate residents' lost clothing and personal items.

#### Rationale and Summary

Interview with a staff member who indicated that there was no procedure developed or implemented related to a process for lost clothing.

Interviews held with staff members who indicated that there was no process for lost clothing. They were unable to provide any documentation related to a process for lost clothing.

Interview held with a staff member who indicated that when they looked for lost resident's clothing in the linen room, that often, the missing clothing is not found, and no further action was done.

Observation of the linen room by Inspector #126 and it was observed that there was clothing on the 6th floor belonging to the resident on the 5th floor.

Sources: Interviews with staff members, observation of the linen room and the lack of documentation related to procedure for lost clothing.

[126]



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

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