

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

Public Report

Report Issue Date: February 3, 2025
Inspection Number: 2024-1318-0004
Inspection Type: Other
Licensee: Regency LTC Operating Limited Partnership, by it general partners, Regency Operator GP Inc. and AgeCare Iris Management Ltd.
Long Term Care Home and City: AgeCare Wenleigh, Mississauga

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): November 22, 25, 29, 2024.
The inspection occurred offsite on the following date(s): December 2 and 16, 2024.

The following was inspected for concerns with maintenance, housekeeping, dietary services, and pest management.

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

- Housekeeping, Laundry and Maintenance Services
- Infection Prevention and Control
- Safe and Secure Home

INSPECTION RESULTS

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

WRITTEN NOTIFICATION: Safe and secure home

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

Non-compliance with: FLTCA, 2021, s. 5

Home to be safe, secure environment

s. 5. Every licensee of a long-term care home shall ensure that the home is a safe and secure environment for its residents.

The licensee has failed to ensure the home was a safe environment for its residents.

A tour of the home was conducted. The walls in many different corridors were designed with an overlay made of hard plastic and metal, to protect walls from damage. The plastic and metal were damaged to the point whereby sharp plastic pieces and metal were sticking out. The condition presented a safety risk to anyone walking by.

During an interview with the ESM, the licensee stated that they are aware of the damages to the baseboards.

The licensee is required to ensure all home areas are made safe for residents. The licensee should ensure the damaged areas are repaired and/or replaced to remove the health and safety risks.

Sources: Interview with Environmental Services Manager (ESM) and Administrator.
Record Review(s) Preventative Maintenance and home audits.

WRITTEN NOTIFICATION: Infection prevention and control

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

Non-compliance with: O. Reg. 246/22, s. 102 (2) (b)

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

Infection prevention and control program

s. 102 (2) The licensee shall implement,

(b) any standard or protocol issued by the Director with respect to infection prevention and control. O. Reg. 246/22, s. 102 (2).

The licensee has failed to implement the Infection Prevention and Control (IPAC) Standard (revised September 2023) issued by the Director, specifically, section 8.1 (a).

Section 8.1 (a) requires that in addition to the requirement to ensure that the IPAC program is evaluated and updated at least annually, the licensee shall ensure that the IPAC program, including IPAC policies and procedures, are reviewed and updated, more frequently in accordance with emerging evidence and best practices.

The licensee's cleaning and disinfecting procedures related to resident's non-critical reusable medical equipment/devices (e.g., basins, urinals, commodes, bed pans, etc.) between each use (when used by the same resident) were not updated to be in accordance with evidence-based practices. The licensee's policy identified that disinfection was not required if the device was re-used by the same resident.

The IPAC lead expected care staff to use two disposable disinfectant wipes, one to clean the devices with, and the second one to disinfect the devices, followed by hanging the washbasin or bedpan on a hook in the washroom between use. The expectation was not identified in any written cleaning and disinfecting procedures provided for review.

Observations at the time of inspection were indicative of practices not associated with the IPAC lead's expectations.

Sources: Interview with the ESM, IPAC lead, nursing staff, observations, review of

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

AgeCare policy (ALL-ON-205-02-01) Cleaning, Disinfection and Sterilization, and Public Health Ontario's Best Practices for Environmental Cleaning for Prevention and Control of Infections in all Health Care Settings (2018).

COMPLIANCE ORDER CO #001 Food production

NC #003 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 78 (7) (c)

Food production

s. 78 (7) The licensee shall ensure that the home has and that the staff of the home comply with,

(c) a cleaning schedule for the food production, servery and dishwashing areas. O. Reg. 246/22, s. 78 (7).

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

1) Thoroughly clean all food production areas in the main kitchen and all three serveries. The cleaning shall include interior and exterior areas of cabinetry, cold holding units, food carts, transport hot holding units, splash, and food guards at steam tables, surrounding walls and all counter surfaces (underneath, behind and in between), the exterior surfaces of dishwashing machines and wall area, descale and clean hand wash basins and faucets, the floors and baseboards, and maintain in a clean and sanitary manner.

2) Provide re-training for dietary staff on the expectations and level of cleanliness for the kitchen and servery equipment and surfaces, any cleaning and sanitizing procedures in keeping with infection prevention and control best practices, and importance of following the cleaning schedule. Maintain a record as to when re-training was provided, by whom, the topics that were covered, date of re-training, attendee names and signatures. The licensee shall maintain the re-training records for a period of 1 year.

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

3) Develop and implement cleaning schedules for weekly and monthly tasks for the kitchen and all three serveries that allocates adequate dietary or housekeeping hours to deep clean floors, surfaces (walls, ceilings, cabinets, and interior shelving), carts, dishwashing equipment and other equipment that includes a frequency that is dependent on the needs and outcomes of the activities that take place in the kitchen and serveries.

Grounds

The licensee failed to ensure that the staff of the home complied with a cleaning schedule for the food production, servery and dishwashing areas.

An inspection of the main kitchen and dish wash area, and all three serveries occurred, and the following observations were made:

1. The observations for the kitchen, included, but not limited to:
 - a) Heavy grease accumulation under, between and behind food production and storage equipment, including dish carts and hot holding transport units (in rotation and out of rotation).
 - b) Hood/vents in the kitchen and food equipment dust-clogged with accumulated food and beverage splatter.
 - c) Heavy food, beverage and water accumulation on kitchen floors, walls and fixtures (including coolers, freezer, splash/food guards).
 - d) Heavy food accumulation and particulate matter observed on kitchen walls and floors, shelving and gaskets of walk-in cooler and small upright fridge, food contact counter surfaces and underneath, and on dishwashing appliances and walls near dishwasher.
 - e) The dishwashing area contained heavy food and beverage splatter.

2. The serveries on floor 1, 2, and 3 observations included, but were not limited to

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

the following:

- a) Handwashing area (basin, faucet and knobs) showed signs of mineral decay. Heavy food accumulation noted on wall, cupboards beneath and on counter surround.
- b) Beverage dispensers for juice, tea and coffee were dust-clogged and dispensing nozzle had build-up of thick sticky substance. Counter underneath, between and behind had heavy beverage splatter.
- c) Upright beverage cold hold units/refrigerators and gaskets were observed with long standing beverage spills, food accumulation and were poorly organized and lacked the required indicating thermometer.
- d) Hot holding serving units, food guards and surrounding walls contained heavy food, beverage splatter and dead pests on, underneath, in between, front and behind units. Some food guards were not maintained in good condition.
- e) Dishwashing area surrounding walls had heavy food and beverage splatter.

A kitchen cleaning audit for the month of November 2024, identified that deep cleaning had not been completed for many areas in the kitchen.

Failure to implement a detailed cleaning schedule with adequate monitoring and allocation of staff hours for cleaning tasks increases the likelihood of cross-contamination between dirty surfaces and food items.

Sources: Observations, interview with the Environmental Services Supervisor, Food Services Manager and Dietary staff, review of submitted audits and cleaning schedules.

This order must be complied with by March 31, 2025

COMPLIANCE ORDER CO #002 Maintenance services

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

NC #004 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: O. Reg. 246/22, s. 96 (1) (b)

Maintenance services

s. 96 (1) As part of the organized program of maintenance services under clause 19 (1) (c) of the Act, every licensee of a long-term care home shall ensure that,
(b) there are schedules and procedures in place for routine, preventive and remedial maintenance.

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

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

As part of the organized program of maintenance services under clause 19 (1) (c) of the Act, every licensee of a long-term care home shall ensure that, (b) there are schedules and procedures in place for routine, preventive and remedial maintenance.

The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]: The licensee shall be compliant with O. Reg. 246/22, s. 96 (1) (b)
1. Develop a maintenance procedure for fixtures and a procedure for surfaces (walls, floors, ceilings.). Include in each procedure a minimum of the following information:
a) Who is responsible for monitoring the surface or fixture and how often;
b) What forms or checklists are to be completed to assist with any monitoring task;
c) What the staff member is required to observe or do;
d) The required or acceptable condition of the surface or fixture;
e) Follow up requirements if an unacceptable condition is identified;
f) Acceptable time frames, based on risk, for repair or replacement; and
g) Any additional tasks as required to maintain the fixture or surface, in a good state of repair.

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

2. Review existing audits and checklists and ensure they include the surfaces and fixtures of resident rooms, washrooms, utility rooms, common areas, corridors, and tub/shower rooms.

3. Using the above developed audit forms, conduct routine audits of the above noted spaces to determine what deficiencies require attention. The audit results shall be maintained for one year and include who conducted the audit(s), what was identified, the date of the audit(s), course of action that was taken to address the deficiency and the date the deficiency was resolved.

4. Provide the inspector with an action plan on how the deficiencies identified by the inspector in the grounds below (a to f) will be addressed, and completed, and include who will be responsible for addressing the maintenance issue or deficiency and the proposed allocated time to complete the work. Please send the requested plan to the attention of the Inspector by March 1st, 2025.

Grounds

As part of the organized program of maintenance services, the licensee failed to ensure that there were schedules and procedures in place for routine, preventive and remedial maintenance.

The licensee did not develop preventive maintenance audits and a schedule to audit their resident rooms, common areas, corridors, utility rooms, washrooms and tub/shower rooms for condition. No remedial plans to address the deficiencies identified below were available.

A tour of the home was conducted which included resident home areas (RHAs) and randomly selected resident bedrooms and washrooms, main kitchen in basement, serveries on floors 1, 2 and 3, and dining rooms, lounges, activity rooms, utility rooms and tub/shower rooms, and exterior of the building. The following observations were made at the dates/times of the inspection:

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

- a. Walls were noted to be patched, unpainted, peeling, had large holes, water stained, or water damaged in different areas throughout the home;
 - b. Poorly maintained bathroom fixtures with heavy metal decay, rendered uncleanable;
 - c. Porous non-cleanable surfaces existed whereby several areas of the vanity tops in resident washrooms were peeling, damaged and or missing;
 - d. Resident washroom ceiling tiles on all home areas were water-stained and/or damaged;
 - e. Ceilings in many resident rooms and washrooms were observed to have a black appearance around the vents (appeared to be a buildup of soot);
 - f. Flooring in many resident washrooms was heavily stained, and unsealed.
- Failure to develop, implement and comply with the maintenance program schedules and procedures has created adverse conditions in the home which does not align with the fundamental principle under the Fixing Long Term Care Act to live in a place with dignity and in a safe and comfortable environment.

Sources: Observations, interviews with SL (Senior Leadership), IPAC, ESM (Environmental Services Manager), FSM (Food Safety Manager), Nursing and PSW (Nursing and Personal Support Worker), and HSKPG (Housekeeping staff), Record Reviews included audits, invoices, policies, procedures and protocols.

This order must be complied with by March 31, 2025

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

REVIEW/APPEAL INFORMATION

TAKE NOTICE The 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
e-mail: MLTC.AppealsCoordinator@ontario.ca

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

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:

Health Services Appeal and Review Board

Attention Registrar
151 Bloor Street West, 9th Floor

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

Toronto, ON, M5S 1S4

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th Floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

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 www.hsarb.on.ca.