

**Ministry of Long-Term Care**

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

**Central West District**

609 Kumpf Drive, Suite 105  
Waterloo, ON, N2V 1K8  
Telephone: (888) 432-7901

<b>Original Public Report</b>	
<b>Report Issue Date: February 20, 2024</b>	
<b>Inspection Number:</b> 2024-1365-0001	
<b>Inspection Type:</b> Critical Incident Follow up	
<b>Licensee:</b> Regency LTC Operating Limited Partnership, by it general partners, Regency Operator GP Inc. and AgeCare Iris Management Ltd.	
<b>Long Term Care Home and City:</b> AgeCare West Williams, Kitchener	
<b>Lead Inspector</b> JanetM Evans (659)	<b>Inspector Digital Signature</b>
<b>Additional Inspector(s)</b>	

<b>INSPECTION SUMMARY</b>
<p>The inspection occurred onsite on the following date(s): February 13 - 16, 2024</p> <p>The following intake(s) were inspected:</p> <ul style="list-style-type: none"> <li>• Intake: #00103334 - Follow up related to neglect</li> <li>• Intake: #00104263 - related to an outbreak</li> </ul>

**Previously Issued Compliance Order(s)**

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

Order #001 from Inspection #2023-1365-0009 related to FLTCA, 2021, s. 24 (1) inspected by JanetM Evans (659)

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

Food, Nutrition and Hydration  
Infection Prevention and Control  
Pain Management

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Infection prevention and control program

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

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

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).

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

The licensee has failed to ensure that the standard issued by the Director with

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respect to additional IPAC precautions was implemented.

**Rationale and Summary:**

The IPAC Standard for Long Term Care Homes (LTCHs), dated April 2022, section 9.1 (f) documented additional precautions should include appropriate selection application, removal and disposal of PPE.

The home's policy for PPE use stated that employees would follow proper procedure/order for donning and doffing PPE to prevent cross contamination and that PPE was to be removed and disposed of when the interaction ended. In addition to this, the policy directed staff that prescription eyeglasses were not acceptable as eye protection and that staff were to use safety goggles, face shields or visors attached to masks.

A) A PSW was observed to enter a room where signage posted identified the resident as on droplet contact precautions. The PSW did not apply the proper eye protection.

B) A housekeeper entered a room where a posting on the resident's door identified them as on droplet contact precautions. They were observed to exit and re-enter resident's room twice prior to removing their PPE, then doffed the PPE incorrectly, including failing to remove their N95 mask when they left the resident's room the final time.

Failing to follow the standard related to Additional Precaution for PPE including donning, doffing and disposal puts residents and staff at risk of potential cross contamination of infectious agents.

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Sources: Observations, Ministry of Health COVID-19 Guidance for Public Health Units: Long-Term Care Homes, Retirement Homes, and Other Congregate Living Settings Version 11 – June 26, 2023, MLTC COVID-19 Guidance: Personal Protective Equipment (PPE\_ for Health Care Workers and Health Care Entities, version 1.0 June 10, 2022, Policy #LTC-CA-WQ-205-03-05 Personnel Protective Equipment, dated November 2023, interviews with staff.

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