



**Ministry of Long-Term
Care**

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

**Ministère des Soins de longue
durée**

**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
Feb 11, 2021	2021_785732_0003	001464-21, 001835-21	Complaint

Licensee/Titulaire de permis

0760444 B.C. Ltd. as General Partner on behalf of Omni Health Care Limited Partnership

2020 Fisher Drive Suite 1 Peterborough ON K9J 6X6

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

Woodland Villa
30 Milles Roches Road, R.R. #1 Long Sault ON K0C 1P0

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

EMILY PRIOR (732)

Inspection Summary/Résumé de l'inspection

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**

The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): February 4, 5, and 8, 2021

Log #001835-21 and log #001464-21, related to infection prevention and control, were inspected in this Complaint inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, an Eastern Ontario regional IPAC team member, a Registered Nurse, a Registered Practical Nurse, Personal Support Workers, a housekeeper, and a COVID screener.

In addition, the inspector(s) reviewed relevant policies and procedures; and observed the provision of care and services to residents, resident care areas, and infection prevention and control measures.

**The following Inspection Protocols were used during this inspection:
Infection Prevention and Control**

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

**1 WN(s)
1 VPC(s)
0 CO(s)
0 DR(s)
0 WAO(s)**

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NON-COMPLIANCE / NON - RESPECT DES EXIGENCES
Legend

WN – Written Notification
 VPC – Voluntary Plan of Correction
 DR – Director Referral
 CO – Compliance Order
 WAO – Work and Activity Order

Légende

WN – Avis écrit
 VPC – Plan de redressement volontaire
 DR – Aiguillage au directeur
 CO – Ordre de conformité
 WAO – Ordres : travaux et activités

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).

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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).

Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

WN #1: 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 a staff member participated in the implementation of the infection prevention and control program.

As part of the Long-Term Care Home's infection prevention and control (IPAC) program, interventions were put in place for staff members to help prevent the spread of COVID-19. In January 2021, a staff member failed to participate in the implementation of the IPAC program. This failure put other staff members and the residents they cared for at risk.

Sources: Management of COVID-19 Policy; Directive #3 for Long-Term Care Homes under the Long-Term Care Homes Act, 2007; screening questionnaire; and interview with Administrator and other staff. [s. 229. (4)]

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 staff participate in the implementation of the infection prevention and control program, to be implemented voluntarily.



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Issued on this 17th day of February, 2021

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

Original report signed by the inspector.