

Ministry of Long-Term Care

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

Central East District

33 King Street West, 4th Floor
Oshawa, ON, L1H 1A1
Telephone: (844) 231-5702

Original Public Report

Report Issue Date: April 11, 2024	
Inspection Number: 2024-1310-0001	
Inspection Type: Critical Incident Follow up	
Licensee: Mackenzie Health	
Long Term Care Home and City: Mackenzie Health Long Term Care Facility, Richmond Hill	
Lead Inspector Miko Hawken (724)	Inspector Digital Signature
Additional Inspector(s) Natalie Jubian (000744)	

INSPECTION SUMMARY

<p>The inspection occurred onsite on the following date(s): March 25 - 28, 2024</p> <p>The following intake(s) were inspected:</p> <ul style="list-style-type: none"> • Intake: #00103635 – First follow-up – Compliance Order (CO) #001/2023-1310-0003, O. Reg. 246/22 - s. 13, Compliance Due Date (CDD): March 15, 2024 • Intake: #00105787 - related to an outbreak • Intake: #00107311 - related to the breakdown of major system

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Previously Issued Compliance Order(s)

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

Order #001 from Inspection #2023-1310-0003 related to O. Reg. 246/22, s. 13 inspected by Miko Hawken (724)

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

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

INSPECTION RESULTS

WRITTEN NOTIFICATION: DIRECTIVES BY MINISTER

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

Non-compliance with: FLTCA, 2021, s. 184 (3)

Directives by Minister

s. 184 (3) Every licensee of a long-term care home shall carry out every operational or policy directive that applies to the long-term care home.

The licensee has failed to ensure that where the Act required the licensee of a Long-Term Care Home (LTCH) to carry out every operational Minister's Directive that applies to the LTCH, the operational Minister's Directive was complied with.

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In accordance with the Minister's Directive, COVID-19 guidance document for LTCH's in Ontario, dated August 30, 2022, licensee was required to conduct weekly Infection Prevention and Control (IPAC) self-audits when the home was in COVID-19 outbreak.

Rationale and Summary

The home was in a COVID-19 outbreak for an approximate 8 week period. The Associate Director of Care (ADOC) stated that the home would complete the Public Health of Ontario (PHO) "COVID-19 Self Assessment Audit Tool for Long-Term Care Homes and Retirement Homes" weekly when in outbreak. The home did not have records of the audits for multiple weeks during the period of the outbreak. The ADOC confirmed the same and could not verify if the audits were completed during that time.

By failing to ensure IPAC audits were completed once a week during a COVID-19 outbreak, there was an increased risk of transmission of infection.

Sources: The home's "COVID-19 Self Assessment Audit Tool for Long-Term Care Homes and Retirement Homes" audit records and interview with ADOC. [000744]