

Ministère des Soins de longue durée

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

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 No de l'inspection

May 5, 2021

2021 828744 0007

Inspection No /

Loa #/ No de registre

004744-21, 004775-21, 004901-21

Type of Inspection / **Genre d'inspection**

Complaint

Licensee/Titulaire de permis

St. Joseph's Health Centre of Sudbury 1140 South Bay Road Sudbury ON P3E 0B6

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

St. Gabriel's Villa of Sudbury 4690 Municipal Road 15 Chelmsford ON P0M 1L0

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs STEVEN NACCARATO (744)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): April 6-9, 2021.

The following intakes were inspected upon during this Complaint Inspection:

- Three intakes which were complaints submitted to the Director regarding concerns related to staffing shortages and Infection Prevention and Control (IPAC) measures.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care (DOC), Assistant Director of Care (ADOC), Environmental Services Manager, Registered Nurses (RN), Registered Practical Nurses (RPN), Personal Care Attendants (PCA), Housekeepers, Lobby Deputy, and residents.

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

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	Légende
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	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).	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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:



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1. The licensee has failed to ensure that staff participated in the implementation of the infection prevention and control program, regarding the active screening of visitors for COVID-19 exposure.

The home's COVID-19 Management Guidelines indicated that visitors were to be actively screened on entry for symptoms and exposures for COVID-19.

As per the version of Directive #3 in effect on April 7, 2021, as issued by the Chief Medical Officer of Health, long-term care homes must actively screen all staff, visitors and anyone else entering the home for COVID-19.

Furthermore, version 3 of the COVID-19 Screening Tool for Long-Term Care Homes and Retirement Homes in effect May 6, 2020, as issued by the Ministry of Health, indicated that specific questions should be used to screen individuals for COVID-19 before they are permitted entry into the home. One specific question on the screening tool was "Have you had close contact with anyone with respiratory illness or a confirmed or probable case of COVID-19?"

The home did not ask the Inspector if they had been in close contact with anyone with respiratory illness or a confirmed or probable case of COVID-19, when the Inspector entered the home. The Environmental Services Manager indicated that everyone entering the home should be asked about their possible contact with anyone with a probable case of COVID-19.

The incomplete screening of people entering the home presented a risk of exposing the residents to COVID-19.

Sources: Inspector observations at the entrance of the home; "Villa St. Gabriel Villa Covid 19 Management Guidelines and PCRA (Point of Care Risk Assessment)" (revised January 12, 2021), Directive #3 (version effective as of April 7, 2021); COVID-19 Screening Tool for Long-Term Care Homes and Retirement Homes (effective as of May 6, 2020); Home's COVID-19 Screening tool; and interviews with the Environmental Services Manager and other staff. [s. 229. (4)]



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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 regarding the active screening of visitors for COVID-19 exposure, to be implemented voluntarily.

Issued on this 6th day of May, 2021

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

Original report signed by the inspector.