
COMPLIANCE ORDER TO BE MADE AVAILABLE IN THE HOME

Pursuant to the *Retirement Homes Act, 2010* S.O. 2010, Chapter 11, section 90.

COMPLIANCE ORDER NO. 2022-S0105-90-01 – KELSO PINES RETIREMENT HOME.

ORDER SUMMARY

The Deputy Registrar has determined that there is a risk of harm to residents of Kelso Pines Retirement Home (the “Home”) related to COVID-19 and is concerned about the possibility of staff shortages as well as the potential for further spread of COVID-19.

REQUIRED ACTION

The Licensee shall immediately and for the duration of this Order and at the Licensee’s expense,

- a) Ensure that there is, at all times, a designated individual on staff at the Home who is responsible for the operations of the Home, and who has the appropriate authority to issue directions with respect to Infection Prevention and Control (IPAC) measures and staffing, including purchasing necessary equipment(s) and retaining additional staffing personal as required;
- b) Ensure that there are sufficient qualified staff in the Home to, at all times, implement appropriate IPAC measures, including active screening of all individuals entering the Home and residents in the Home, perform environmental cleaning of the Home, and to provide care services to residents. For added clarity, compliance with this section includes retaining temporary external care providers, personal support workers, regulated health professionals, active screeners, and/or professional cleaners as may be required;
- c) Follow and implement all directions, instructions and/or plans related to IPAC or staffing the Home given by the local medical officer of health or designate from the Grey Bruce Health Unit;
- d) Ensure that all staff at the Home implement and follow the most up-to-date Chief Medical Officer of Health (CMOH) Directives, issued under section 77.7 of the *Health Protection and Promotion Act*, and in particular Directives #3 and #5, including but not limited to:
 - i. Conducting proper active screening and monitoring of all individuals who enter the Home and of the residents of the Home;

- ii. Implementing an appropriate staffing contingency plan to ensure the Home is a safe and sanitary environment for residents and staff during the COVID-19 outbreak;
 - iii. Training all staff on the Home's IPAC Program, including but not limited to the use of Personal Protective Equipment (PPE) in the Home, active screening practices and procedure, management of COVID-19 cases among residents, physical distancing requirements and environmental cleaning practices;
 - iv. Ensuring that all staff properly use PPE and hand sanitizer in the Home; and
 - v. Conducting appropriate internal auditing of IPAC practices to ensure full and proper implementation.
- e) Ensure that a member of staff is designated to audit compliance with the Home's IPAC Program as it pertains to the CMOH Directives on an ongoing and regular basis;
- f) Maintain records of staff training, active screening, environmental cleaning and audits of the Home's IPAC Program;
- g) **Provide the following to the RHRA within 1 week** of the issuance of this Order:
- i. A list of all staff and volunteers who work in the Home, their qualifications, work contact information, and dates on which each completed their IPAC training and training on Directive #3 issued by the CMOH;
 - ii. A work schedule outlining what staff members are present in the Home at any given time;
 - iii. A written description of steps the Licensee is taking to ensure there is appropriate staff coverage in the Home at all times;
 - iv. A written description of what steps the Licensee is taking to audit and monitor all staff, volunteers, and external care providers to ensure they are conducting themselves in accordance with the applicable CMOH Directives; and
 - v. Active screening, environmental cleaning, and audit records for the week, to demonstrate compliance with IPAC requirements..