

# **Report to Homes Committee of Management**

From: Michele Harris, Director of Homes and Seniors Services

**Date:** June 10, 2025

**Subject:** Homes – Committee of Management – Long-Term Care Operational Report

January 1, 2025 – March 31, 2025

#### Recommendation(s):

THAT, the report titled "Homes – Committee of Management – Long-Term Care Operational Report January 1, 2025 – March 31, 2025" dated June 10, 2025 be received and filed.

#### Introduction:

This report provides an overview of the day-to day operations of the three (3) County of Elgin Homes along with pertinent departmental and committee updates and inspections for the period of January 1, 2025 to March 31, 2025.

### **Background and Discussion:**

#### Ministry of Long-Term Care (MLTC) Compliance Inspection Reports Summary

MLTC inspections are unannounced and last from 1 day to 2 weeks depending on the purpose of the inspection. There are several types of inspections of long-term care homes as follows:

- Reactive Inspections which are done in response to complaints or critical incident submissions and generally focus on the substance of the complaint or incident; and follow-up inspections conducted to ensure that any compliance orders have been addressed.
- Proactive Inspections which are broad-based inspections carried out on a regular basis to ensure that a home is in ongoing compliance with the Act and Regulation.
- Other types of inspections include pre-occupancy and post-occupancy inspection visits to a home undergoing the development/redevelopment of beds.

#### **Bobier Villa**

Ministry inspectors visited the Home on March 19, 20, and 21, 2025 to conduct a critical incident inspection regarding an outbreak at the Home. Inspection protocols utilized during the inspection included Infection Prevention and Control.

During the course of the inspection the inspector made relevant observations, reviewed records and conducted interviews. A written notification was issued related to the debrief requirement following an outbreak.

# Bobier Villa Inspection Report March 2025

#### Elgin Manor

Ministry inspectors visited the home on Feburary 11, 12, 13, 14, 18, 19, 20, and 21, 2025 to conduct a proactive compliance inspection. Inspection protocols utilized during the inspection included Resident Care and Support Services, Skin and Wound Prevention and Management, Residents' and Family Councils, Food, Nutrition and Hydration, Medication Management, Infection Prevention and Control, Safe and Secure Home, Prevention of Abuse and Neglect, Quality Improvement, Staffing, Training and Care Standards, Residents' Rights and Choices, and Pain Management.

During the course of the inspection the inspectors made relevant observations, reviewed records and conducted interviews. Two written notifications were issued. One written notification which was related to safe storage of drugs during medication pass; and one written notification related to medication destruction and disposal.

## Elgin Manor Inspection Report February 2025

### Terrace Lodge

Ministry inspectors visited the Home on February 3 and 4, 2025 to conduct a critical incident inspection. Inspection protocols utilized included Infection Prevention and Control and Falls Prevention and Management.

During the course of the inspection the inspectors made relevant observations, reviewed records and conducted interviews. There were no findings of non-compliance.

# Terrace Lodge Inspection Report February 2025

## Critical Incident Systems Report Summary for all Three (3) Homes

Т	ypes of Critical Incidents – January 1, 2025 – March 31, 2025	Total Number – Three
		Homes
	buse & Neglect – Any alleged, suspected or witnessed abuse of a resident y anyone or neglect of a resident by the licensee or staff that resulted in	10

harm or risk of harm to the resident, misuse or misappropriation of	
residents' money, misuse or misappropriation of funds provided to licensee.	
Unlawful or Improper or Incompetent Treatment or Care – Includes care of	5
a resident that resulted in harm or risk of harm to resident.	
Unexpected death – Including a death resulting from an accident or suicide.	1
Medication Incident – Includes a medication incident or adverse drug	0
reaction in respect of which a resident is taken to hospital.	
Environmental Hazard – Includes breakdown or failure of the security	2
system or major equipment or a system in the Home that affects the	
provision of care or the safety, security or well-being of residents for a	
period greater than six hours.	
Disease Outbreak	6
Contamination of Drinking Water Supply	0
Incident that Causes Injury and Transfer to Hospital – includes injury in	5
respect of which a person is taken to hospital resulting in signficant change	
in status.	
Controlled Substance Missing/Unaccounted – Includes missing or	0
unaccounted for controlled substance.	
Written Complaint	2

The above noted critical incidents have been reviewed and internally investigated. It is important to note that the abuse and neglect critical incident reporting includes "harm or risk of harm". Each of the three Homes has a memory care resident home area supporting mild to severe cognitively impaired residents that may, at times, and despite interventions, exhibit responsive behaviours resulting in "risk of harm". The Homes are diligent in reporting responsive behaviours in the "risk of harm" category with 8 of the 10 reports falling into this category. Follow up to each incident is conducted by the management team in collaboration with both the internal and external Behavioural Support Ontario (BSO) teams and is ongoing to develop interventions and update plans of care to support all residents on the memory care resident home areas and throughout the Homes.

Two (2) written complaints were received in this quarter across the Homes and were responded to as per legislative requirements.

The management team and continuous quality improvement teams have developed and implemented a plan of action to address each of the critical incident related areas and written complaints, including, but not limited to, providing additional training and education as required.

#### Outbreaks

Home	Number of Outbreaks and Agents	Timeframe of Outbreak	Number of Resident Cases
Bobier Villa	1 Suspect Outbreak – COVID 19	January 10 -22, 2025	1 Resident Home Area, 3 residents

Elgin Manor	2 Confirmed Outbreaks #1 – Rhinovirus (Common Cold) #2 – Coronavirus	#1 January 9 – 17, 2025 #2 March 17 – April 7, 2025	#1 Entire home – 6 residents #2 One Resident Home Area – 12 residents
Terrace Lodge	3 Confirmed Outbreaks #1 – Influenza A, COVID 19 #2 – Norovirus  #3 – Influenza A and COVID 19	#1 – Dec. 30, 2024 – January 21, 2025 #2 – February 6 – March 6, 2025 #3 – February 21 – March 13, 2025	#1 – Entire Home, 37 residents #2 – Entire Home, 51 residents #3 – Two Resident Home Areas, 10 residents

Elgin and Oxford communities experienced increased infections/illnesses during the January – March quarter cold and flu season which did result in an increased number of outbreaks across the three LTCHs. The IPAC teams across the Homes continue to provide education to staff, residents and families and promote the recommended vaccinations (RSV, COVID, influenza, pneumococcal, etc.). Staff vaccination promotion continues across the Homes.

Infection Prevention and Control (IPAC) managers continue to participate in the IPAC Hub and Community of Practice meetings/opportunities. Ongoing collaboration with Southwestern Public Helath continues to support accuracy in decision-making and planning regarding updated circulating pathogens, guidance documents and policy and procedures.

Each Homes IPAC team conducts biweekly IPAC audits and provides staff, residents and visitors with education to support IPAC measures including, but not limited to, hand hygiene, personal protective equipment, passive screening for symptoms, etc. IPAC audits are conducted weekly during suspect/confirmed disease outbreaks.

In response to the updated IPAC policy and procedures in December 2024, this quarter has seen the implementation of a revised Antibiotic Resistant Organism (ARO) screening tool which includes C. Auris, as required by the MLTC and Public Health Ontario. Additionally, the recommended changes to the Tuberculosis (TB) screening tool has resulted in a decreased number of chest xrays (CXR) being required upon admission. CXRs are now only required as per criteria within the TB screening tool.

Bobier Villa has implemented a closed hand sanitizing system in the common areas, hallways and resident rooms at the point of care. Additionally an electronic hand hygiene audit has been rolled out and is available for all staff to utilize via a QR code and on all desktop computers and is being utilized by all staff across all departements. Both of these initiatives support hand hygiene compliance, effectiveness, awareness and minimize transmission risk.

Mandatory Masking continued for staff, students and volunteers during this quarter due to the increased outbreak activity within the Homes and throughout the community. Mandatory masking continues to be evaluated and adjusted based on local activity and guidance documents.

## Occupancy Data

A 97% occupancy rate is required to support full ministry funding. All 3 Homes continue to work diligently to support >97% occupancy rates, despite outbreak(s).

Home Name	Occupancy Data excluding respite bed January 1 – March 31, 2025	Admissions	Discharges
Bobier Villa	99	6	4
Elgin Manor	99.9	10	10
Terrace Lodge	97.67	10	14

## Health System Partners (i.e. Fire, Public Health, Ministry of Labour)

- Monthly fire drills and health and safety inspections are conducted each month on all shifts at all three Homes.
- The annual 2024 fire inspection report at Bobier Villa was received in January and compliance was achieved. One fire extinguisher was replaced in the main kitchen.
- Bobier Villa received a visit from the Ministry of Labour (MOL) on December 27, 2024 in regard to Personal Protective Equipment (PPE) and a follow-up visit on January 3, 2025. Orders were received on January 3, 2025, in regard to an obstruction in the basement related to a delivery of supplies; and, in regard to expired PPE with an extended expiry date. The orders were complied with prior to the MOL compliance date and the MOL confirmed that the Home was in compliance on January 27, 2025.
- Terrace Lodge fire plan was updated to reflect the final Phase, Phase 3 of the Redevelopment project and was approved by Malahide Fire Department in February.
- There were no public health inspections for the dietary departments across the 3 Homes, however, Public Health was involved in the pre-occupancy inspection for Phase 3 of the Terrace Lodge Redevelopment Project to support occupancy approval.

#### Dietary and Housekeeping/Laundry Departmental Updates

Department	Bobier Villa	Elgin Manor	Terrace Lodge
Dietary	St. Patrick's Day	The dietary staff	Terrace Lodge
	traditional Irish	and kitchen were	main kitchen

creative delivering meal was prepared renovations were and enjoyed with theme meals with complete and the entertainers in kitchen in full use. January Whitelock to celebrating Staff were excited Chinese New Year complete the Irish to participate in the Phase 3 move celebration. and February into the Pine and Valentine's The new winter Events. Chestnut serveries, dining menu was rooms and home launched in The dietary team January with the successfully kitchen spaces addition of new which are being managed menu items providing services enioved by during a boil water residents and requested by residents including advisory in the staff. Meat Lovers Pizza, month of Sauteed Shrimp February. Terrace Lodge An efficient way to provides Meals on Scampi, Colossal test the Boil Water Carrot Wheels services Cheesecake and Code policy! through a Baked Salmon with partnership with a Lemon Dill VON. Our staff Elgin Manor Sauce! provides Meals on participated in the Wheels services March 4 Meals The purchase of a promotion event through a new conveyer partnership with along with staff VON. Our staff from VON and toaster to help volunteer drivers. improve the participated in the preparation of March 4 Meals toast for breakfast promotion event was very well along with the County Warden, received by residents. staff from VON and volunteer drivers. Food Committee Theme meal Theme meal Finalization of the planning continued planning continues new menu was - Chinese New with February completed. enjoyment of tacos Year and Residents and nachos and a Valentine's Day. suggested a new 70's themed idea - "Chefs Choice" meal entertainment; and March focusing on which involves the Irish celebrations. cook of the month Families were creating a menu 1 invited to join their day/month - this loved ones for the will begin in May. festivities.

			The reopening of
			the tuck shop in
			the new event &
			tuck shop space
			occurred and the
			space is extremely
			well utilized and
			enjoyed 7
			days/week!
			The Auxiliary
			members should
			be congratulated
			for successfully
			providing tuck
			shop opportunities
			for residents and
			visitors during
			Phase 3 of the
			project temporarily
			in the library
			space.
			Events supported
			by the dietary
			department
			included
			Valentines and St.
			Patrick's Day
			celebrations with
			an authentic Irish
			menu, special
			snacks and green
			beer.
Housekeeping/laundry	The Manager of	The housekeeping	Housekeeping
	Support Services	team was kept	staff have
	completed the	busy with outbreak	experienced
	Public Health	IPAC	significant change
	Ontario Infection	management, and,	in job routines
	Prevention and	supporting the	throughout the
	Control	dining room floor	project and should
	Environmental	replacement	be commended for
	Best Practices	project in each RHA.	their ability to
	modules for long- term care.	Throughout the	adjust and accommodate to
	terri care.	month of March	support both
		the team prepared	operational needs
		the chapel to	and the needs of
		become a	the residents.
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		temporary dining room each week while working through the 4 dining room replacement project. Dietary and housekeeping staff made this timeframe special for residents with many feeling as though they were "going out for meals to a restaurant" – kudos to all staff, all departments for supporting this work and resident experience!	Housekeeping staff completed training as part of the Public Health Ontario Infection Prevention and Control Environmental Best Practices modules for long-term care.
Joint Health & Safety	Code Drill Reviews included Code White, Code Blue and Code Red.	Code Drill reviews included Code Yellow and Code White drill	Monthly Code Drills with team members with an enhanced focus this quarter on
	Additional eye wash stations and fire extinguishers were installed as a proactive measure.	Active drills – Code Orange, Loss of Essential Service (water), and Boil water.	Code Red related to the building updates as part of the redevelopment project.
	Regular inspections and fire drills.	Workplace Violence Risk Assessment finalized.	Code Brown drill.  Regular inspections and fire drills.
		Regular inspections and fire drills.	

# Resident & Family Council Updates

Resident Council	Bobier Villa	Elgin Manor	Terrace Lodge
January 2025	Average of 8	Average of 10	Meeting delayed
	residents attend the	residents attend the	due to outbreak.
	monthly meetings.	monthly meetings.	Information shared
	Topic highlights for	Topic highlights –	with residents from

	January, February and March – Resident and family satisfaction survey results, CQI update including review of and opportunity to participate in 2025-2026 QIP, Recreation programs.	satisfaction survey results 2024, special events and outings, Ontario Association of Resident Council membership renewal.	Ontario Association of Residents Council. 11 residents attended January 30 meeting. Topic highlights - redevelopment project, water temperatures, front door, HVAC system, IPAC,
February 2025	Topic highlights for January, February and March — Resident and family satisfaction survey results, CQI update including review of and opportunity to participate in 2025-2026 QIP, Recreation programs.	Topic highlights – CQI updates, review and opportunity to provide input into proposed 2025- 2026 QIP, car show in June	Meeting cancelled due to outbreak status.
March 2025	Topic highlights for January, February and March — Resident and family satisfaction survey results, CQI update including review of and opportunity to participate in 2025-2026 QIP, Recreation programs.	Meeting cancelled due to outbreak.	4 residents attended the March 13 meeting. Topic highlights - redevelopment project, front door, TSN sports coverage, IPAC, 2024 resident and family satisfaction survey results, CQI update including review of and opportunity to participate in 2025- 2026 QIP.
Family Council January 2025	5 members part of Family Council which is an increase by one member. Continue to meet monthly in person and virtually	8 members part of Family Council. Continue to meet monthly in person and virtually to support attendance.	Meeting postponed due to outbreak.

	to support attendance.		
February 2025	Topic highlights for January, February and March include CQI updates, proposed QIP 2025- 2026 review and opportunity to provide input, Diners Committee, Recreational Programs.	Topic highlights for February and March – CQI updates, Resident and family satisfaction survey results, CQI update including review of and opportunity to participate in 2025-2026 QIP, Recreation programs.	6 members attended the February 5, 2025 meeting. Topic highlights – 2024 Satisfaction survey results, IPAC and outbreak updates, referrals, redevelopment project, Public Health Inspection, new and special event menus, program and leisure.
March 2025	Topic highlights for January, February and March include CQI updates, proposed QIP 2025- 2026 review and opportunity to provide input, Diners Committee, Recreational Programs.	Topic highlights for February and March – CQI updates, Resident and family satisfaction survey results, CQI update including review of and opportunity to participate in 2025-2026 QIP, Recreation programs.	4 members attended the March 12 meeting. Topic highlights included clothing labels, redevelopment update, election polls, CQI update, review and opportunity to provide input on proposed QIP for 2025 -2026, dental services, recreation programing and upcoming events.

# **Program and Therapy Department Updates**

Item	Bobier Villa	Elgin Manor	Terrace
			Lodge
Special Programs &	Chinese New Year	Subway Lunch	Shiloh
Event Highlights	Lunch Outing	Club	Mennonite
			Choir
	Muffins & Movies	Shiloh Mennonite	
		Choir	Catfish
	70's Show and		Creek
	Dinner Music	Visit from Animal	Conservation
		Aide	Authority
	Art Classes		Presentation

	Sunday Tea with Entertainment	Chinese New Year	<ul><li>Blue Bird</li><li>Habitats</li></ul>
	Irish Day Party	Art Therapy  Celebration of Life	Crafting with Helen
	Pizza and Trivia Night	Pottery Class	Sensory
	Spring Luncheon	Waffle Breakfast	Visits Wheel of
	Easter Bunny Visit	Celtic Dancers (Auxiliary Sponsored)	Fortune & Family Feud & Jeopardy Challenge
		St. Patrick's Day Party (live music)	Puppy Visits
		Tai-Chi	Little Hobby Hill Animal Visits
			St. Patrick's Day Party
			Spring Cookie Decorating
			Travelling Goats
Volunteer Services	9 active, 15 registered volunteers	13 active and registered volunteers	4 new volunteers (Gift Shop)
	2 new applicants to start April 2025	4 new applicants	Recruitment ongoing for
	1 exceptionally dedicated volunteer who visits every Tuesday morning for 1:1 visits with residents		portering, horticulture, lending library management
Education & Training	Alzheimer's Socieity – healthy brains, dementia in the younger population	Alzheimer's Socieity – healthy brains, dementia in the younger population	Ongoing annual education

No student placements this quarter	No student placements this quarter	No student placements this quarter
		-

# **Nursing Department Updates**

Item	Bobier Villa	Elgin Manor	Terrace Lodge
Education	Clinical Pathways –	Clinical Pathways –	Clinical Pathways –
	admission	admission	admission
	assessment,	assessment,	assessment,
	delirium	delirium	delirium
	assessment	assessment	assessment
	registered staff	registered staff	registered staff
		Wound Care	
Phase 3 Move Day	Bobier Villa	The Education	Significant planning
	Manager of	Lead/Quality	and collaboration
	Resident Care	Improvement	across all
	provided support to	Coordinator	departments to
	the Terrace Lodge	dedicated	support residents
	readiness for	additional time to	and families for 2
	Phase 3 Move Day.	support Phase 3	Phase 3 move
		move day	days!
		education.	

# **Continuous Quality Improvement**

Indicators reported within the Homes – Committee of Management – Directors Report through the Quality Improvement Plan (QIP) progress report, narrative, workplan and annual report for each Home.

# **Administrative Updates**

Item	Bobier Villa	Elgin Manor	Terrace Lodge
Clinical Connect	Training and	Training and	Training and
	implementation in	implementation in	implementation in
	progress as	progress as	progress as
	connectivity issue	connectivity issue	connectivity issue
	resolved.	resolved.	resolved.
Staffing Updates	No changes	No changes	Manager of
			Resident Care
	Recruitment of the	Recruitment of the	position
	Education	Education	Recruitment of the
	Coordinator	Coordinator	Education
	Position across the	Position across the	Coordinator
	3 Homes	3 Homes	

			Decition course the
			Position across the
			3 Homes
Education	Management and	Management and	Management and
	MDSRAI staff	MDSRAI staff	MDSRAI staff
	attending	attending	attending
	educational	educational	educational
	opportunities for	opportunities for	opportunities for
	inter-RAI LTCF and	inter-RAI LTCF and	inter-RAI LTCF and
	Clinical Pathways	Clinical Pathways	Clinical Pathways
Individual Home	Bobier Villa worked	Elgin Manor team	Terrace Lodge
Highlights	collaboratively with	was well prepared	management and
	the continence care	for, and celebrated	staff worked
	provider to achieve	an excellent	diligently to
	budgetary targets	proactive	successfully
	and positive	compliance	prepare for pre-
	resident outcomes	inspection,	occupancy Phase 3
	– well done!	congratulations to	inspection and two
		all staff, all	(2) move days into
		departments!	the Pine and
			Chestnut Resident
			Home Areas. We
			could not have
			done this without
			the valued support
			from all 3 Homes,
			library, facilities,
			and administration!

# **Financial Implications:**

None

# Advancement of the Strategic Plan:

The long-term care operational report aligns with the following Corporate Strategic Plan priorities:

- Strategy 2: Organizational Culture and Workforce Development
- Strategy 3: Service Excellence and Efficiency

# **Local Municipal Partner Impact:**

None

# **Communication Requirements:**

Information has been communicated to the appropriate departments, resident council, family council, residents, staff and visitors as required.

#### **Conclusion:**

The long-term care homes management team continues to be thankful for the support from Council, the Chief Administrative Officer, the Senior Management team, and the staff in all departments as we work collaboratively to maintain and improve services and care for our residents, families, staff and communities.

Michele Harris Blaine Parkin

Director of Homes and Seniors Services Chief Administrative Officer/Clerk