



COMMUNITY SERVICES COMMITTEE AGENDA

Community Services Committee Meeting
Monday, November 16, 2020
Tom Davies Square - Council Chamber / Electronic Participation

COUNCILLOR RENE LAPIERRE, CHAIR

Geoff McCausland, Vice-Chair

4:30 p.m. COMMUNITY SERVICES COMMITTEE MEETING
COUNCIL CHAMBER / ELECTRONIC PARTICIPATION

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ROLL CALL

DECLARATIONS OF PECUNIARY INTEREST AND THE GENERAL NATURE THEREOF

COMMUNITY DELEGATIONS

1. Flour Mill Urban Farm (ELECTRONIC PRESENTATION) (FOR INFORMATION ONLY)

- Inga Kaletka, Executive Director, Social Planning Council
- Miranda MacLeod, Flour Mill Community Farm Coordinator

(The Flour Mill Urban Farm was invited by Councillor Kirwan. This presentation provides information regarding the expansion of farm programming.)

2. Seniors' Advisory Panel and Age Friendly Strategy Committee (ELECTRONIC PRESENTATION) (FOR INFORMATION ONLY)

- Barb Nott, Co-Chair, Seniors' Advisory Committee
- Birgit Pianosi, Member, Age Friendly Committee
- Barb Eles, Member, Age Friendly Committee

(The Seniors' Advisory Panel and Age Friendly Strategy Committee was invited by Councillor Kirwan. This presentation will provide an overview of the progress made towards becoming an age friendly community.)

REGULAR AGENDA

MANAGERS' REPORTS

- R-1. Report dated October 29, 2020 from the General Manager of Community Development regarding 2021 Provincial Child Care Administration Funding Reduction. **4 - 7**

(RESOLUTION PREPARED)

(This report provides a recommendation regarding Provincial funding changes to the Children Services budget.)

- R-2. Report dated October 28, 2020 from the General Manager of Community Development regarding Children's Aid Transit Bus Pass Subsidy. **8 - 11**

(RESOLUTION PREPARED)

(This report provides a recommendation regarding possible options to provide a GOVA Transit subsidy to the Children's Aid Society to support transportation needs for their clients to be considered as part of the 2021 budget process.)

MEMBERS' MOTIONS

CORRESPONDENCE FOR INFORMATION ONLY

- I-1. Report dated October 28, 2020 from the General Manager of Community Development regarding Pioneer Manor - 3rd Quarter Report.
(FOR INFORMATION ONLY)

12 - 24

(This report provides information regarding operational issues and good news stories for Pioneer Manor.)

ADDENDUM

CIVIC PETITIONS

QUESTION PERIOD

ADJOURNMENT

Request for Decision

2021 Provincial Child Care Administration Funding Reduction

Presented To: Community Services Committee

Presented: Monday, Nov 16, 2020

Report Date Thursday, Oct 29, 2020

Type: Managers' Reports

Resolution

THAT the City of Greater Sudbury approves the utilization of the Children Services Reserve to offset the projected provincial child care administration funding reduction for the 2021 budget year, as outlined in the report entitled "2021 Provincial Child Care Administration Funding Reduction", from the General Manager of Community Development, presented at the Community Services Committee meeting on November 16, 2020.

Relationship to the Strategic Plan / Health Impact Assessment

This report is related to the Quality of Life and Place Pillar. It recommends accessing a reserve fund to ensure that services designed to improve the health and wellbeing of youth, families, and seniors are not restricted as a result of provincial funding reductions.

Report Summary

This report outlines the impact of provincial funding changes to the Children Services budget in 2020, 2021, and 2022. A reduction in the administration funding is scheduled for 2021 and 2022, while a reduction in expansion funding was introduced in 2020. Council previously approved the use of the historical mitigation reserve to cover anticipated shortfalls in 2020 as part of the budget process, however the COVID-19 pandemic resulted in the closure of child care programs for several months and therefore staff do not expect to require funding support from the Children Services Reserve fund for 2020. While the 2021 budget process has identified some cost savings applied to reduce the overall administration budget, there remains an unfunded balance. This report recommends the use of the mitigation reserve fund for one-time funding to reduce the municipal impact in 2021.

Signed By

Report Prepared By

Monique Poirier
Manager of Children Services
Digitally Signed Oct 29, 20

Health Impact Review

Monique Poirier
Manager of Children Services
Digitally Signed Oct 29, 20

Manager Review

Monique Poirier
Manager of Children Services
Digitally Signed Oct 29, 20

Division Review

Tyler Campbell
Director of Social Services
Digitally Signed Oct 29, 20

Financial Implications

Steve Facey
Manager of Financial Planning & Budgeting
Digitally Signed Nov 4, 20

Recommended by the Department

Steve Jacques
General Manager of Community Development
Digitally Signed Nov 4, 20

Recommended by the C.A.O.

Ed Archer
Chief Administrative Officer
Digitally Signed Nov 4, 20

Financial Implications

The financial impact of the 2021 provincial administration funding reductions to Children Services could be mitigated through the use of the Children Services Reserve Fund. The fund has a total balance of \$6.3 million. If approved, a draw from the Reserve Fund could be used to cover any anticipated shortfall for the 2021 budget. This draw is approximately \$290,000.

2021 Provincial Child Care Funding Reduction Impact

Background

On April 18, 2019, the Ministry of Education released the Child Care and Early Years allocations for 2019 and announced a new requirement for municipal cost-sharing of provincial child care expansion funding and administration funding to be implemented from 2020 to 2022. As part of the 2020 budget process, Council approved the use of the Children Services Reserve fund to offset the related funding shortfall for 2020 to allow staff time to provide options for service level reductions to deal with the funding loss.

A report was provided to the Community Services Committee on March 2, 2020 and Council approved a reduction of \$750,000 to child care subsidies for the discretionary Early Development and School Readiness (EDSR) Program to deal with the impact of the reduction in expansion funding. Approval was also given for an annual spending cap on this program in future years. The Children Services reserve fund was intended to cover the costs of existing children in the program, which would allow the program to adjust naturally to the new cap through attrition of children. While the Children Services Reserve Fund was approved to be used to cover an anticipated shortfall in 2020, the COVID-19 pandemic resulted in the closure of child care programs for several months. As a result, staff do not expect to require funding support from the Children Services Reserve fund for 2020.

This report provides a recommendation to deal with the second part of the funding reduction in the area of administration, which is set to be implemented over the next two budget years in 2021 and 2022.

Local Impact

Through the 2020 and 2021 municipal budget processes, the Children Services Section has carefully reviewed all administrative expenditures and has implemented some reductions and reallocations where appropriate to reduce the overall administrative budget. With the amalgamation of Children Services and Social Services into one division, costs were reviewed and in some cases reallocated within the Social Services provincial service contract. Further changes are anticipated as a result of a review of the divisional structure. At this time every effort has been taken to limit the impact of this funding change, without affecting service levels.

For the 2021 budget year, there remains an unfunded balance of \$290,855 in excess of available provincial funding and historical municipal tax levy. The current projection for 2022 has a total impact of \$490,786 as the final impact if the funding reduction phase in is implemented.

Funding Option

The 2021 Children Services budget is being prepared with the option to fund this shortfall through the Children Services Reserve, as there is no longer an anticipated need to fund any 2020 shortfalls from this reserve. The Children and Social Services Division is currently reviewing service levels and its organizational structure that may provide further opportunity for cost reductions in future years. Due to the COVID-19 pandemic, Child Care Service System Managers across the province have requested an extension and re-evaluation of the

administrative funding formula change from the Ministry of Education, although there is presently no indication that the Province will revise this decision.

The reserve fund has an approximate value of \$6.3 million and was intended to deal with the transition of provincial funding reductions in cases such as this.

Next Steps

Service System Managers from across the Province will continue to advocate to the Province for a review and reconsideration of the implementation of provincial funding changes planned for 2021 and 2022, due to the impact of the COVID-19 pandemic and the increased burden of administrative oversight of managing local child care systems.

Options for administrative funding requirements beyond 2021 will need to include consideration of service level impacts post-COVID. Staff will present these service level considerations in 2021 once all other options for responding to the provincial funding reductions have been exhausted.

Resources

2020 Provincial Child Care Funding Reduction Impact Report dated February 14, 2020, presented to the Community Services Committee on March 2, 2020:

<https://agendasonline.greatersudbury.ca/index.cfm?pg=agenda&action=navigator&id=1496&itemid=18376&lang=en>

Request for Decision

Children's Aid Transit Bus Pass Subsidy

Presented To: Community Services Committee

Presented: Monday, Nov 16, 2020

Report Date: Wednesday, Oct 28, 2020

Type: Managers' Reports

Resolution

THAT the City of Greater Sudbury directs staff to prepare a business case to support funding for the Children's Aid Society as defined in option number _____, and as outlined in the Report entitled "Children's Aid Transit Bus Pass Subsidy", from the General Manager of Community Development, presented at the Community Services Committee Meeting on November 16, 2020, for consideration for inclusion in the 2021 municipal budget process.

Relationship to the Strategic Plan / Health Impact Assessment

This supports the strategic pillar of Creating a Healthy Community by supporting the use of transit services to children and families within the Children's Aid Society in an effort to improve health, economic and social outcomes for citizens.

Report Summary

During the September 14, 2020, Community Services Committee meeting, the Children's Aid Society (CAS) presented information regarding the linkages between children in foster care and homelessness. Following the presentation, Staff was given direction to prepare a report regarding a proposed business case to provide CAS with a subsidy for GOVA Transit bus passes for potential inclusion in the 2021 budget. This report outlines two subsidy options for discussion, which could be included in a business case and presented to Council in the 2021 budget deliberations

Financial Implications

Financial implications will be identified in the Business Case submission if directed to do so by the

Signed By

Report Prepared By

Laura Kenyon
Transit Service Coordinator
Digitally Signed Oct 28, 20

Health Impact Review

Laura Kenyon
Transit Service Coordinator
Digitally Signed Oct 28, 20

Division Review

Michelle Ferrigan
Director of Transit Services
Digitally Signed Oct 28, 20

Financial Implications

Steve Facey
Manager of Financial Planning & Budgeting
Digitally Signed Oct 28, 20

Recommended by the Department

Steve Jacques
General Manager of Community Development
Digitally Signed Oct 28, 20

Recommended by the C.A.O.

Ed Archer
Chief Administrative Officer
Digitally Signed Nov 4, 20

Committee.

Executive Summary

During the September 14, 2020, Community Services Committee meeting, the Children's Aid Society (CAS) presented information regarding the linkages between children in foster care and homelessness. The presentation outlined the need for CAS to work in partnership with all members of the community in order to access and provide clients with important essential services, such as transportation.

Following the presentation, Staff was given direction to prepare a report regarding a proposed business case to provide CAS with a subsidy for GOVA Transit bus passes for potential inclusion in the 2021 budget. This report outlines two subsidy options for discussion, which could be included in a business case and presented to Council in the 2021 budget deliberations.

Background

The Children's Aid Society is responsible for assisting in providing essential services to vulnerable members of the Community including infants, children, and youth who may be at risk of or currently are experiencing physical, sexual and/or emotional abuse, neglect and abandonment. The majority of children and families involved with CAS receive services that protect and support children while they remain with the families in the Community.

In 2019, to reduce financial barriers and meet transportation needs of clients, the Children's Aid Society of the District of Sudbury and Manitoulin purchased a variety of bus passes from the City of Greater Sudbury, for a total of \$54,243.50.

Table 1 - 2019 GOVA Transit Bus Pass Purchases:

Fare Media Purchased	# Units Purchased	Rate	Actual Cost
Cash	2060	\$ 3.50	\$ 7,210.00
6 Ride Cards	2075	\$ 17.50	\$ 36,312.50
31 Day Pass Adult	17	\$ 88.00	\$ 1,496.00
31 Day Pass Students	123	\$ 75.00	\$ 9,225.00
			\$ 54,243.50

Business Case Options

Staff are recommending two options for the Community Services Committee's consideration and direction:

Option 1: Concession Fare Rate: Based on the Miscellaneous User Fee By-Law, CAS purchase 6-Ride Cards and 31-Day Passes at Adult or Student rates. Staff recommends a subsidy in the form of Concession Rates as per Table 2 – Concession Rate Financial Impact. This would represent an overall subsidy of approximately 15%, resulting in loss revenue of approximately \$8,000 for the City of Greater Sudbury.

Table 2 – Concession Rate Financial Impact:

Fare Media	# Units Purchased	Subsidy Rate	Cost	Subsidy
1 Ride Card	2060	\$ 3.50	\$ 7,210.00	\$ -
6 Ride Cards	2075	\$ 15.00	\$ 31,125.00	\$ (5,187.50)
31 Day Pass Adult	17	\$ 56.00	\$ 952.00	\$ (544.00)
31 Day Pass Students	123	\$ 56.00	\$ 6,888.00	\$ (2,337.00)
			\$ 46,175.00	\$ (8,068.50)

Option 2 – Grant: Alternatively, a lump sum in the form of a grant could be available to the Children’s Aid Society. This would provide the CAS with the ability to purchase any fare media up to and including the amount approved under the Grant.

Next Steps

Staff is looking for direction to prepare a Business Case, which would be included for consideration in the 2021 Budget Deliberations.

For Information Only

Pioneer Manor - 3rd Quarter Report

Presented To:	Community Services Committee
Presented:	Monday, Nov 16, 2020
Report Date	Wednesday, Oct 28, 2020
Type:	Correspondence for Information Only

Resolution

For Information Only

Relationship to the Strategic Plan / Health Impact Assessment

This information report supports Council's Strategic Plan in the areas of *Asset Management and Service Excellence* and more specifically in the area of *Creating a Healthier Community* through alignment of the Population Health Priorities of Families, Holistic Health and the Age Friendly Strategy.

Report Summary

This report for information was prepared to provide Community Services Committee a quarterly update regarding operational issues and good news stories for Pioneer Manor.

Financial Implications

There are no financial implications associated with this report.

Signed By

Report Prepared By

Glenda Gauthier
Manager of Resident Care
Digitally Signed Oct 28, 20

Health Impact Review

Glenda Gauthier
Manager of Resident Care
Digitally Signed Oct 28, 20

Division Review

Aaron Archibald
Director of Long Term-Care Services
Digitally Signed Oct 28, 20

Financial Implications

Steve Facey
Manager of Financial Planning & Budgeting
Digitally Signed Oct 28, 20

Recommended by the Department

Steve Jacques
General Manager of Community Development
Digitally Signed Oct 28, 20

Recommended by the C.A.O.

Ed Archer
Chief Administrative Officer
Digitally Signed Nov 4, 20

EXECUTIVE SUMMARY

Pioneer Manor is committed to providing a safe, healthy, and supportive environment by treating residents, families, visitors and employees, with respect and fairness. The Home strives towards finding a balance between ensuring resident safety and that the quality of life is not being adversely affected by the safety measures put into place.

GOOD NEWS STORIES

Beginning June 18, 2020, long-term care homes were allowed outdoor visits of one person per resident, each week at a minimum. In July, the Ministry expanded the visitation policy to two persons per resident, for visits outdoors and inside the Home. The visiting policy was further updated in September, which clarified that caregivers are considered to be essential visitors and important partners in care who provide direct care to residents; such as helping with feeding, mobility, hygiene, or cognitive stimulation and include family members or friends, privately hired caregivers, paid companions and/or translators. The updated policy permits up to two caregivers to visit the Home at any time, including during an outbreak, and without time limits.



Picture retrieved from CBC news article “Pioneer Manor visits reunite loved ones” <https://www.cbc.ca/news/canada/sudbury/sudbury-pioneer-manor-long-term-care-visits-resume-1.5622691>

Ministry of Long-Term Care (MOLTC)

Inspections conducted by MOLTC (see reference 1 below for definitions)

During the third quarter of 2020, the MOLTC contacted Pioneer Manor once to follow up on eight (8) critical incidents that had been submitted. No areas of noncompliance were found.

Between July 6 and 10, 2020, the MOLTC inspectors were on site to conduct a “Critical Incident” and a “Complaints” inspection resulting in the Home receiving zero (0) compliance orders (CO), two (2) voluntary plan of correction (VPC) and one (1) written notification (WN). The Home has put a plan in place to address all areas of non compliance. In addition, the inspectors conducted a “Follow up” inspection to a compliance order the Home received in January 2020. The Home was found to be in compliance and the order was lifted.

Critical Incident Reports

All critical incidents (CI) involving residents must be reported to the Director [under the Act] as designated under the *Long-Term Care Homes Act 2007*. The incidents are documented within the on-line Mandatory Critical Incident System (CIS) and received by the the MOLTC (see reference 2 below for definitions).

2020 Q3 CIs Relating to "Alleged/Actual Abuse/Assault"		
Number of CIs Submitted	13	
Number of CIs Resident to Resident	6	46%
Number of CIs Staff to Resident	6	46%
Number of Staff to Resident allegations substantiated	1	17%
Number of CIs Visitor to Resident	1	8%
2020 Q3 Other CIs Submitted		
Incident that causes an injury to a resident for which the resident is taken to hospital and which results in a significant change in the resident's health status	9	
Controlled Substance missing/unaccounted	2	
Outbreak	1	
Improper/Incompetent treatment	1	
Missing Resident < 3 hours	0	
Unexpected Death	0	
Unlawful Conduct	0	

Complaints/Concerns

As per section 56 (2) of the Long-Term Care Homes (LTCH) Act 2007, the Home has a duty to respond in writing within ten (10) days of receiving a concern, request, or recommendation from either the Resident or Family Councils.

Due to the COVID-19 pandemic, Resident and Family Council meetings have been suspended since March, 2020.

As per O. Reg. 79/10, s. 101, every written or verbal complaint made to the Home or a staff member concerning the care of a resident or operation of the Home is investigated and resolved where possible, and a response indicating what the licensee has done to resolve the complaint, or that the Home believes the complaint to be unfounded and the reasons for the belief within ten (10) business days of the receipt of the complaint.

Seven (7) written concerns were submitted by residents' family members in relation to care issues. All concerns were investigated and family members received a written response to their concerns. All family members were satisfied with the response received.

Ministry of Labor (MOL)

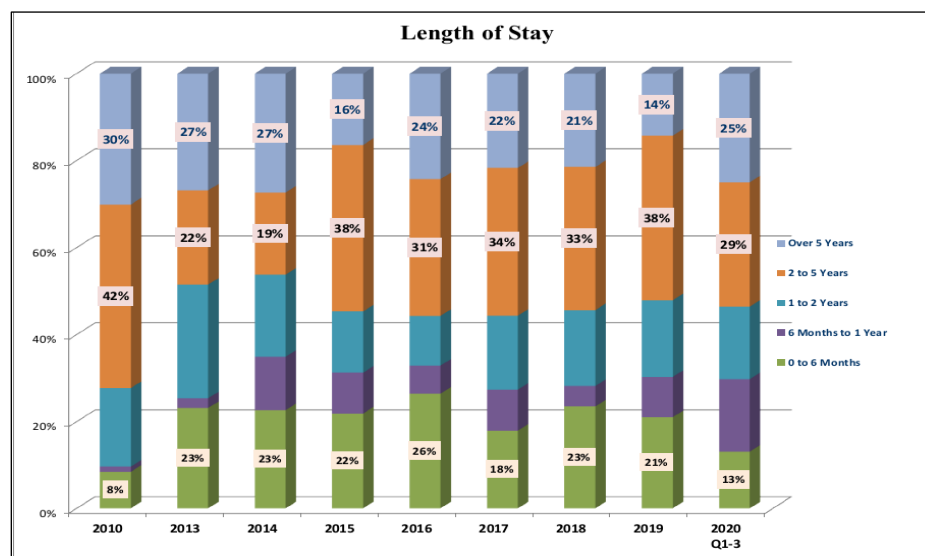
Due to a Pioneer Manor employee testing positive for COVID-19, the MOL was on site on August 13th to respond to a notice of occupational illness and outbreak made to the Ministry of Labour, Training, and Skills Development. No orders were issued to the Home.

Key Performance Indicators

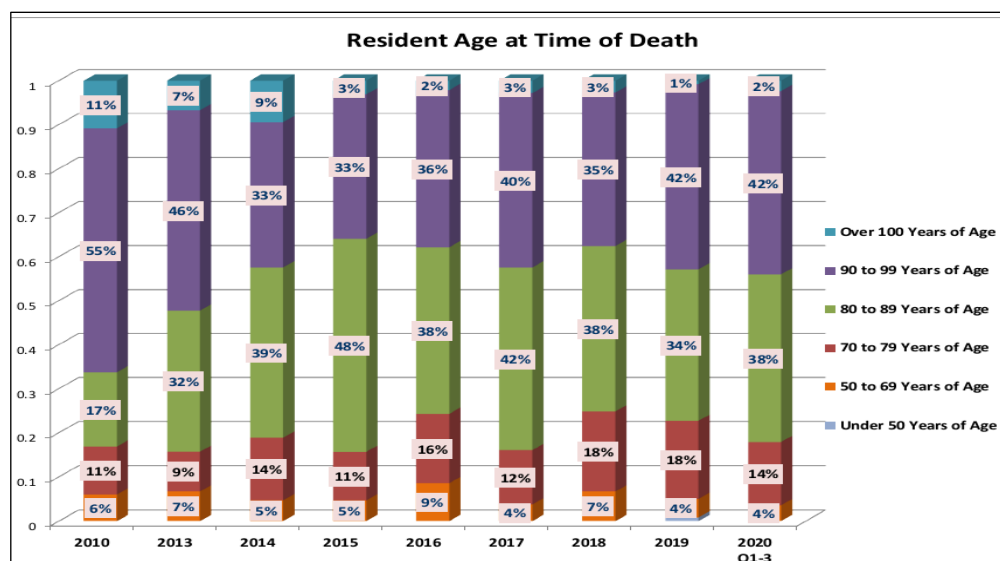
Long-Term Care Home Availability (as of May 2020)					
Facility Name	Beds	# on waitlist for Basic Bed	# on waitlist Private Beds	Average beds available/month	Total # waiting
Pioneer Manor	433	457	201	10	608
North East LHIN	1555			3	1174

Resident Care Stats (433 Residents)		2018	2019	2020 Q1-3
Admissions	Total	144	134	67
Discharges	Total	9	11	5
Deaths	Total	149	119	84
Internal Transfers	Total	107	100	71
Occupancy Rate	Required to maintain >97%	99%	99%	96.36

From January 1 to September 30, 2020, 93% of residents who passed at away did so at the Home (versus the hospital) compared to 86% in 2019 and 81% in 2018.



From January 1 to September 30, 2020, 51% of residents who passed away were residents at Pioneer Manor longer than two years compared to 72% in 2010. This is reflective of residents being admitted to the Home with higher acuity.



From January 1 to September 30, 2020, 46% of residents were over 90 years of age at time of death compared to 66% in 2010

Infection Control

Tracking of infection control rates and analysis of the information to identify clusters (note inherited cases are brought into the Home from the community) continued during the third quarter of 2020.

During the third quarter of 2020, Pioneer Manor had one (1) outbreak declared by Public Health Sudbury and Districts (PHSD).

The Home received confirmation of a positive COVID-19 test result for a staff member at Pioneer Manor. As per the most recent provincial directives, Public Health assesses each unique situation in determining if an outbreak should be declared. Due to the nature of the job duties of the staff member and their contact with numerous residents in different areas of the Home, PHSD declared Pioneer Manor to be in a facility wide outbreak on July 29, 2020. In addition, PHSD directed Pioneer Manor to obtain COVID-19 swabs on all residents and staff in the Home. Pioneer Manor was in the midst of doing surveillance swabs for all staff on July 29th and 30th. On July 30th, all resident and staff members swabs were completed. All test results returned negative and no further transmission was identified throughout the duration of this outbreak.

In consultation with PHSD, it was determined that the staff member who had tested positive had two (2) identified employees as close contacts. Both close contacts were advised to remain at home (away from work) until fourteen (14) days post date of exposure.

All indoor and outdoor visits for residents were cancelled for the duration of the outbreak, as were small group activities. Daily outbreak management teleconferences were held for the outbreak management group.

The COVID-19 outbreak at Pioneer Manor was declared over on August 11, 2020. The duration of this outbreak was fourteen (14) days.

COVID-19 Pandemic

On March 17, 2020, a state of emergency was declared in Ontario under the Emergency Management and Civil Protection Act relating to the COVID-19 Pandemic. Pioneer Manor has been vigilant in its efforts to protect its residents, as well as staff and visitors. "Appendix A" provides specific details relating to Pioneer Manor's Response to COVID-19.

Public Health Sudbury & Districts (PHSD) Visits

During the third quarter of 2020, PHSD attended the Home six (6) times to conduct various routine inspections.

On July 14th and 15th, PHSD was in to conduct an institutional food safety compliance inspection on all serveries, the Bistro and main kitchen. No violations were issued to the Home.

On September 15th and 16th, PHSD was in to conduct an institutional food safety compliance inspection on all serveries, the Bistro and main kitchen. The Home received one violation; it was noted that the Tulip Home Area ceiling vents were observed with dust accumulated above the hot table and above the dishwashers. A follow visit occurred on October 1st and no violations noted.

On September 29th PHSD conducted an inspection as per Provincial direction that all LTC homes be inspected. They reviewed the following: enteric specimen kits to ensure not expired, cleaning schedules, cleanliness of resident rooms, spa rooms etc, laundry procedures, fire plans, COVID distancing, overall cleanliness and presence of hot and cold water in resident rooms. No violations were issued to the Home.

Falls Prevention

Number of Residents	Q3 2020
Using chair or chair pad sensors	110
Using bed sensors or bed pad sensors	153
Using infrared sensors	6

Monthly audits of universal precautions were completed by committee members. Among the concerns needing attention were; loose bed rails, light not working, call bell in washroom not working, bedrail photo missing, and mats left on floor. All areas of concerns were reviewed and issues addressed.

Facility Services

Remedial painting continued throughout the Home. A generator test was completed during each month of the third quarter of 2020.

Fire Sprinkler

Tender for the supply, delivery, installation and commissioning an extension of the existing fire sprinklers at Pioneer Manor (in the basement) was issued June 12, 2020 and closed on July 15, 2020. The contract has been awarded and construction is expected to begin during the fourth quarter of 2020.

Emergency Preparedness

During the third quarter of 2020, fire drills on all three shifts occurred each month. There were nine (9) Code Whites (situation with an actual or potential violent or out of control person). In addition, there were zero (0) Code Yellow (missing resident), three (3) Code Reds (fire), and zero (0) Code Blue (medical emergency).

Reference 1

The Long-Term Care Home Quality Inspection Program (LQIP) safeguards residents' well-being by continuously inspecting complaints and critical incidents, and by ensuring that all Homes are inspected at least once per year. This is achieved by performing unannounced inspections and enforcement measures as required, and ensuring that actions taken by the government are transparent. The MOHLTC conducts complaint, critical incident, and follow up, comprehensive and other types of inspections. An RQI inspection is a comprehensive, systematic two-stage inspection.

For each instance where 'non-compliance' with the legislation has been identified during an inspection a decision must be made by the inspector on the appropriate action to take, including whether to impose a sanction that is an Order. At minimum the inspector will issue a **Written Notification of Non-Compliance (WN)**. Whether further action is required is based on an assessment of the following factors; severity and scope of harm (or risk of harm) resulting from the non-compliance and the licensee's past history of compliance for the last 36 months. Actions taken may include; **Voluntary Plan of Correction (VPC)**, which is a written request for the Home to prepare a written plan of correction for achieving compliance to be implemented voluntarily. The Home is not required to submit the plan to the ministry. There is no required compliance date set out in the inspection report. **Compliance Order (CO)**, which is an order for the licensee to do anything, or refrain from doing anything to achieve compliance with a requirement under this Act or; prepare, submit, and implement a plan for achieving compliance with a requirement under this Act. The Home is required to follow the Order to achieve compliance with the LTCHA within the timelines for compliance set out in the Order. **Work and Activity Orders (WAO)**, which is an order for the Home to allow employees of the ministry, or agents or contractors acting under the authority of the ministry, to perform any work or activity at the LTC Home that is necessary, in the opinion of the person making the order, to achieve compliance with a requirement under this Act; and to pay the reasonable costs of the work or activity. The Home is required to follow the Order to achieve compliance with the LTCHA within the timelines for compliance set out in the Order. **Written Notification and Referral to the Director (WN & Referral)** is a written notification to the Home that they have referred the matter to the Director for further action by the Director. (*LTCHA, 2007, C.8 s. 152 – 154*).

Reference 2

The LTCH Act defines a CI as an event which poses a potential or actual risk to the safety, security, welfare and/or health of a resident or staff member or to the safety and security of the facility which requires action by staff and/or outside agencies.

- A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the MOLTC Director:
 - Improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident,
 - Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident,
 - Unlawful conduct that resulted in harm or a risk of harm to a resident
 - Misuse or misappropriation of a resident's money,
 - Misuse or misappropriation of funding provided to a licensee under this Act,
 - An emergency, including fire, unplanned evacuation, or intake of evacuees that affect the

provision of care or the safety, security or well being of one or more resident of a LTC Home.

- A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall within one (1) business day report the information upon which it is based to the MOHLTC Director:
 - An unexpected or sudden death, including a death resulting from an accident or suicide,
 - A resident who is missing for three hours or more,
 - Any missing resident who returns to the home with an injury or any adverse change in condition regardless of the length of time the resident was missing,
 - An outbreak of a reportable disease or communicable disease as defined in the Health Protection and Promotion Act,
 - Contamination of the drinking water supply,
 - An environmental hazard, including a loss of essential services, flooding, breakdown or failure of the security system or a breakdown of 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,
 - A missing or unaccounted for controlled substance,
 - A medication incident or adverse drug reaction in respect of which a resident is taken to hospital,
 - An injury in respect of which a person is taken to hospital and that resulted in a significant change in the resident's health condition.

Pioneer Manor's Response to COVID-19 Pandemic 2020 Q3 Update

A number of proactive measures are in place including active screening for those entering the home, , enhanced infection prevention, control program and cleaning, keeping residents and families informed.

Pioneer Manor continues to follow direction from the Chief Medical Officer of Health, the Ministry of Long-Term Care, and Public Health Sudbury and Districts since the beginning of the pandemic. The Home continues to review all possible courses of action to minimize the risk of exposure to residents from COVID-19. Here is a listing of the many proactive measures that have already been implemented, including:

- **Active screening** of staff, residents, essential, caregivers and general visitors including temperature checks twice daily
- **Physical distancing** of residents, visitors and staff members
- **Bistro** on a "take-out" only manner
- **Enhanced infection prevention, control program and cleaning measures**
-
- **Process for delivery** of resident items (ie **Admissions and Readmissions** must have a negative test result prior to entering home and placed on droplet/contact isolation for 14 days.
- **Pandemic Planning and admission process**, we maintain eleven (11) empty private rooms for residents to self-isolate upon admission and to isolate in the event of COVID-19 positive residents.
- **All Pioneer Manor employees continue to not work at any other health care settings.**
- **Communications** - keeping residents and families informed calls, letters, website and reminding staff about COVID-19 symptoms, to self-monitor for illness and to stay at home when they are sick.

On May 31st, the Ministry of Long-Term Care (MOLTC) released a memo, *COVID-19 Testing for Long-Term Care Home Staff*, stating that the province is requiring continued surveillance of all long-term care home staff. The memo also outlines that all LTC home staff, including front line workers, management, food service workers, contracted service providers, etc., are to be tested, at reasonable intervals. Pioneer Manor performed tests for COVID-19 twice per month throughout the third quarter of 2020 for all staff, CGS redeployed, agency staff and Physicians.

Please note that at this time, the Ministry has not indicated any further surveillance testing for long-term care residents. Pioneer Manor continues to aggressively monitor and test residents with symptoms consistent with COVID-19.

EARLY IDENTIFICATION, PREPAREDNESS & COORDINATION

- Pioneer Manor continues to engage with all local and regional planning tables related to COVID-19 surge. Maintaining partnerships with local health care agencies (Acute Care, Prehospital and Long-Term Care)

- The NELHIN is leading the coordination of long-term care surge planning which Pioneer Manor has been actively engaged with.
- Pioneer Manor Medical Director maintains contact with local, provincial and national counterparts sharing best practices and lessons learned. As a result, Pioneer Manor has implemented numerous processes directly related to information obtained/shared from facilities affected from COVID-19.
- Pandemic Planning
 - Outbreak Management Team
 - Communication protocols are reviewed and draft communications prepared

We continue to monitor residents at Pioneer Manor to look for symptoms consistent with COVID-19.

- Conducting active screening of all residents, twice daily (at the beginning and end of the day) to identify if resident has fever, cough or other symptoms of COVID-19
- Residents with symptoms (including mild respiratory and/or atypical symptoms) will be isolated and tested for COVID-19.

There are currently no confirmed positive cases of COVID-19 at Pioneer Manor.

- Continue to monitor situation closely and currently no confirmed positive cases of COVID-19 in the Home.

Testing will continue for residents with symptoms.

- Residents exhibiting any symptoms consistent with virus (ie cough, runny nose, nasal congestion, sore throat) being tested and placed on isolation immediately
- Residents who may have been in close contact with the resident (i.e. shared a room) are also being tested and placed on isolation immediately.

New admissions and re-admissions to the Home tested for COVID-19 prior to entering PM

- All residents awaiting admission or re-admission to Pioneer Manor must have a negative COVID-19 test prior to admission/readmission to the Home.
- All residents admitted/readmitted are placed on droplet/contact isolation for fourteen days post admission and require a negative COVID-19 test prior to being to isolation being discontinued.

Staffing Levels

- Reviewing contingency plan options for each classification on regular basis.
- Monitoring staffing on a daily basis.
- Booking extra float PSWs and Nutritional Aides for each shift.
- Booking agency staff (dedicated to Pioneer Manor only) booked for weekends as extra PSWs. Continue to actively recruit staff.
- Redeployment of CGS staff continue to assist with screening and food services meal delivery.

Staff Screening for COVID-19

- All staff members are to self-screen at home and not to report to work if they are ill.
- Upon entering the Home, staff are actively screened using screening tool developed by MOLTC.

Life Enrichment Staff continue to enrich residents lives by engaging in one-to-one activities that focus on individual interests while managing social distancing.

- One-on-one activities are taking place with social distancing in mind.
- Adapting programming with physical distancing and implementing creative ways to help residents and families connect by phone or other technologies (Skype, FaceTime, etc).

Technologies Available

- iPad/Tablets/Chromebooks available for use for residents for activities such as: virtual tours (famous museums, zoos, art galleries), Google maps (finding famous landmarks (Travelogue)), and games (matching, cards, word search).

Pioneer Manor remains vigilant in our efforts and are doing everything we can to protect the health and safety of our residents, families, employees, suppliers, service providers and all other visitors.

- Continue to encourage everyone to practice good hygiene.
- Limiting close interactions among those within Pioneer Manor.
- Isolating residents who show symptoms, to help prevent the spread of this virus.
- Employees are wearing personal protective equipment (includes a surgical mask with a shield, a gown and gloves) when caring for symptomatic residents.

Personal Protective Equipment Usage

- Working closely with health authorities and under direction of the Province's Chief Medical Officer of Health to ensure we are following all protocols regarding personal protective equipment usage.
- All employees and visitors wearing masks at all times.
- Ensure appropriate application of Personal Protective Equipment (PPE).
- In consultation with Pioneer Manor's H&S Representatives:
 - Ensure adequate outbreak swab kits are available.
 - Daily monitoring of PPE inventory, JHS to be notified in the event there is a shortage of supply.
 - Ensure appropriate stewardship and conservation of PPE is followed.
 - All employees have been trained on proper use of, donning/doffing, type of PPE and have been provided PPE information on a lanyard card,
 - Signage outside resident's rooms indicating type of precautions required.

What Steps to be taken in the event of an outbreak (resident or staff member tests positive for COVID-19)?

- Explain steps that would be taken if a positive case was confirmed – how you intend to care for individual, how to protect the rest of the home and prevent the spread.
- Reassure residents, families, and the public that we are prepared and a team and plan ready to go if an outbreak occurs.
- Best practices and protocols will be implemented as per the most current directive from the Ministry of Health.
- Pandemic Plan, Outbreak Management Team, Draft Communications (calls to families, Outbreak Notification on Website, updated daily) prepared.
- In the event a resident tests positive for COVID-19, the Home will communicate to the family immediately. All residents and staff working in the Home Area that the resident resides in will be retested for COVID-19.
- Move resident to a private room, currently keeping 8 private beds empty to use for this purpose.

What if I want to discharge my loved one from Pioneer Manor, due to concerns about COVID-19?

- Per current directives, the Substitute Decision Maker (SDM) may elect to discharge their loved one from the Home.
- Resident is discharged from the Home until the end of the pandemic.
- Process for being readmitted will be followed as per the Long-Term Care Homes Act, 2007. (Amendment is intended to free up valuable resources and bed space as the health care system continues to respond to COVID-19).

What if family members have questions or concerns about their loved one at Pioneer Manor?

- Keep residents/families informed through calls and letters, website (information in a timely manner) <https://www.greatersudbury.ca/pioneermanor>.
- Email for questions/concerns, pmcommunications@greatersudbury.ca has been maintained.