

Vancouver Coastal Health

Long Term Care Inspection Report

Inspected by: Niamh Breen

Site Address: 970 Union St Vancouver BC V6A 3V1	Inspection #: INS197180
Facility Inspected: Villa Cathay Care Home - Long Term Care	Inspection Date: 27-Jan-2021
Facility Number: 3078006	Facility Type: Long Term Care
Primary Owner/Licensee: Villa Cathay Care Home Society	Inspection Type: Medical Health Officer Order
Primary Operator/Manager: Szu Chi Lee	Delivery Method: Email

Opening Comments and Observations:
Site visit in order to conduct an assessment of the facilities compliance with the Medical Health Officer Order. Licensing officer met with facility Executive Director and Director of Care.

NIC = Not in compliance IC = In compliance

Long Term Care

Long Term Care - VCH CCFL - Order of the Medical Health Officer

STAFFING/Single Site Staffing

1. All steps necessary to implement the assignment of staff in the Staff Assignment Directive applicable to the facility have been taken. IC
2. Only permitted staff work at the facility to which they have been assigned in the Staff Assignment Directive applicable to the facility. IC
3. Staff personal and employment related information is updated and confirmed in the specified format; and submitted in the time frame, as per the Order of the Medical Health Officer. IC

STAFFING/Notice to staff

4. A copy of the Order of the Medical Health Officer was made available to all staff listed in the Staff Assignment Directive for the facility. IC

Observation: An email was sent to all staff and the order is also available in the facility.

5. Notice was provided to staff in writing that they are assigned to the facility. IC

STAFFING/Volunteers

6. The facility has requested all volunteers to disclose if they have volunteered at another facility in the past 14 days and did not permit them to volunteer at the facility if they have. IC
7. The facility has requested all volunteers to not volunteer at any other facility other than the Operator's facility. IC

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HYGIENE AND COMMUNICABLE DISEASE/Enhanced Cleaning

8. The facility has implemented enhanced cleaning following the guidance document issued by the BC Centre for Disease Control and any additional direction or directive provided by a VCH MHO. IC

HYGIENE AND COMMUNICABLE DISEASE/Staff and Visiting Health Professional Screening

9. Daily staff and/or volunteer screening is conducted in accordance with the prescribed screening tool. IC
10. Staff or volunteers who are newly hired or, have been absent from the facility for 14 days or more, completed the Enhanced Staff Screening form 72 hours prior to their first shift and sent it to the manager or Director of Care (DOC). IC
11. The manager or Director of Care (DOC) has taken the steps as prescribed by the VCH Order of the Medical Health Officer for new staff hires and employees or volunteers absent for 14 days or more. IC
12. Visiting health professionals, including physicians, dentist, podiatrists and others, are screened in accordance with the prescribed screening tool. IC

HYGIENE AND COMMUNICABLE DISEASE/Screening Residents and Reporting Illness

13. Residents are screened daily for symptoms of COVID-19 including respiratory and GI symptoms. IC
14. Facilities deemed by the MHO to require enhanced screening procedures are performing resident screening as directed. IC
15. Residents with new or worsening respiratory symptoms (including fever) are placed immediately on contact and droplet precautions. IC
16. Nasopharyngeal swab(s) have been collected from residents with new or worsening symptoms compatible with COVID-19 (including fever). IC

HYGIENE AND COMMUNICABLE DISEASE/Visitor Policy and Screening

17. The facility screens all visitors in accordance with Visitor Screening Tool posted on the VCH website at each visit. IC

HYGIENE AND COMMUNICABLE DISEASE/Restrictions for Facilities Experiencing an Outbreak

18. The staff working in an outbreak LTCF are not working at any other healthcare facility until the outbreak is declared over by a VCH MHO. IC
19. When an outbreak has been declared by a VCH MHO, the facility has refrained from accepting any new admissions. IC
20. When an outbreak has been declared by a VCH MHO, the facility has refrained from transferring a resident to another LTCF. IC
21. When an outbreak has been declared by a VCH MHO, the facility has notified a VCH MHO prior to a hospital transfer with the exception of an emergency the MHO has been notified as soon as practically possible. IC

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22. When an outbreak has been declared by a VCH MHO, the facility has not permitted the return of residents who have lived temporarily elsewhere in the community until the outbreak is declared over by a VCH MHO. IC

23. The facility has informed family members seeking to temporarily re-home residents of the prohibition on returning to the facility during an outbreak, and discussed the care plan for the resident prior to the person in care's removal from the facility. IC

POLICIES AND PROCEDURES/Visitor Policy and Screening

24. The facility complies with the visitor policy posted on the VCH website. IC

25. In exceptional circumstances, where resident well-being is significantly impacted the facility has applied for an exemption as set out in the directive. IC

PROGRAM/Group Social Activities

26. The facility follows the VCH Order of the Medical Health Officer and/or directive regarding group social activities within the facility and in the community. IC

RECORDS AND REPORTING/Screening Residents and Reporting Illness

27. The facility has reported immediately Influenza-Like Illness ("ILI") or cold-like symptoms identified in residents or staff as directed by the MHO order and/or directives. IC

COMMUNICABLE DISEASE ASSESSMENT/General

28. Communicable Disease signage in the facility Yes

29. Hand sanitizer available at entrance Yes

COMMUNICABLE DISEASE ASSESSMENT/Personal Protective Equipment (PPE)

30. The facility has a supply of PPE Yes

31. The facility has plans to ensure adequate PPE Yes

32. There is signage to guide PPE usage. Yes

COMMUNICABLE DISEASE ASSESSMENT/Screening (Passive - signage)

33. Signs at all facility entrances outlining the current visitor restrictions in place Yes

34. Signs in multiple languages at all entrances reminding people not to enter if they are sick or if they are required to self-isolate in accordance with Public Health directives Yes

35. Signs in multiple languages reminding people within facilities with COVID-19 symptoms to wash their hands, put on a surgical or procedure mask and self-identify to reception or a health care provider Yes

COMMUNICABLE DISEASE ASSESSMENT/Facility Entry Points

36. Limited number of building entry points into the facility Yes

Observation: There is one entrance point that is key pad access only and monitored by screeners.

37. Screening takes place at the building entry points Yes

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| 38. An appropriate script and process has been developed and implemented for active COVID-19 screening at building entry points. | Yes |
| 39. Active screening takes place at all building entry points seven days a week, 24 hours a day | Yes |
| 40. A script has been developed and process implemented for managing individuals who do not comply with screening | Yes |
| 41. There is protection for screeners that do not interfere with communication between the screener and others. | Yes |

COMMUNICABLE DISEASE ASSESSMENT/Hand Hygiene

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| 42. There are signs and posters around the facility to promote and guide proper hand washing by clients, staff and visitors | Yes |
| 43. Alcohol-based hand rub with at least 70% alcohol content should be freely available to clients, staff and visitors throughout the facility. | Yes |
| 44. Sinks are well-stocked with plain soap and paper towels for hand washing | Yes |
| 45. Other supplies, including disinfecting wipes, tissues and waste bins are available as required at point-of-use. | Yes |
| 46. All residents have been taught to perform hand hygiene where physically and cognitively feasible. | Yes |
| 47. Staff assist residents with hand hygiene as needed | Yes |
| 48. The facility promotes and reinforces the importance of diligent hand hygiene and proper hand hygiene technique with staff on an ongoing basis | Yes |

COMMUNICABLE DISEASE ASSESSMENT/Respiratory Hygiene

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| 49. Signs and posters around the facility to encourage and guide clients, staff and visitors on proper respiratory hygiene | Yes |
| 50. There is an adequate supply of tissues and lidded, non-touch waste baskets are available for use by clients, staff and visitors | Yes |
| 51. Where physically and cognitively feasible residents are taught how to perform respiratory hygiene. | Yes |

COMMUNICABLE DISEASE ASSESSMENT/Physical Distancing

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| 52. Physical distancing is promoted | Yes |
| 53. Shared facility space has been organized to maintain a safe physical distance of at least two metres between people | Yes |
| 54. During an outbreak one bathroom can be designated for the affected | Yes |

COMMUNICABLE DISEASE ASSESSMENT/Cleaning and Disinfecting

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| 55. Cleaning and disinfecting policy in place | Yes |
| 56. Facility has enough cleaning supplies (disinfectant, soap, single-use towels) | Yes |

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| 57. Valid cleaning product(s) in use | Yes |
| Observation: The facility use 'Sabor' as their cleaning product. | |
| 58. If bleach used for sanitizing it is prepared daily with the appropriate bleach/water concentration | Yes |
| 59. Soft furnishings cleaned regularly | Yes |
| 60. Facility is clear of clutter | Yes |
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Action(s) Taken

Actions Required by Licensee

No contraventions found - No Action Required

Action(s) Required by Licensing Officer

No contraventions found - No Action Required

Received By:

Inspector:

Villa Cathay Care Home Society

Niamh Breen