

Ministry of Long-Term Care
Long-Term Care Operations Division
Long-Term Care Inspections Branch

North District
159 Cedar St, Suite 403
Sudbury, ON, P3E 6A5
Telephone: (800) 663-6965

Original Public Report

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| Report Issue Date: June 28, 2023 | |
| Inspection Number: 2023-1249-0002 | |
| Inspection Type: Critical Incident System | |
| Licensee: Atikokan General Hospital | |
| Long Term Care Home and City: Atikokan General Hospital, Atikokan | |
| Lead Inspector Steven Naccarato (744) | Inspector Digital Signature |
| Additional Inspector(s) | |

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): May 29-31, 2023.

The following intake was inspected:

- One intake was related to neglect of a resident.

The following **Inspection Protocols** were used during this inspection:

- Infection Prevention and Control
- Prevention of Abuse and Neglect

INSPECTION RESULTS

WRITTEN NOTIFICATION: Duty to protect

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

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Non-compliance with: FLTCA, 2021, s. 24 (1)

The licensee has failed to ensure that a resident was not neglected by staff.

Neglect is defined in O. Reg. 246/22 as the failure to provide a resident with the treatment, care, services or assistance required for health, safety or well-being, and includes inaction or a pattern of inaction that jeopardizes the health, safety or well-being of one or more residents.

Rationale and Summary

A resident did not receive care from staff for an extended period of time.

Staff not assisting the resident with care was a moderate risk to the resident as the resident required the home's assistance for their care.

Sources: The home's policy titled "Zero tolerance of Abuse & Neglect of Residents Policy (renewed on 2022-08-12)"; the home's internal investigation notes; interviews with the DOC and other staff.

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WRITTEN NOTIFICATION: Reporting certain matters to Director

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 28 (1) 2.

The licensee has failed to ensure that neglect of a resident by staff was immediately reported to the Director.

Rationale and Summary

The home's management was notified of an alleged neglect of a resident; however, the Director was not immediately notified.

The home not immediately reporting the incident of alleged neglect to the Director had no impact on the residents.

Sources: The home's policy titled "Zero tolerance of Abuse & Neglect of Residents Policy (renewed on

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2022-08-12)”; A critical incident report; Interviews with the DOC and other staff.

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WRITTEN NOTIFICATION: Directives by Minister

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 184 (3)

The licensee has failed to ensure that every operational or policy directive that applies to the long-term care home related to COVID-19 self-assessment audits, was complied with.

Rationale and Summary

In accordance with the Minister’s Directive: COVID-19 response measures for long-term care homes, effective August 30, 2022, licensees shall ensure the development and implementation of a COVID-19 Outbreak Preparedness Plan which must include conducting regular IPAC audits in accordance with the “COVID-19 Guidance Document for Long-term Care Homes in Ontario”.

At minimum, homes must include in their audit the “COVID-19: Self-Assessment Audit Tool for Long-Term Care Homes and Retirement Homes”.

At the time of inspection, the last two required audits had not been completed.

There was no impact and low risk to the residents, at the time of the non-compliance, when the home had not completed the COVID-19: Self-Assessment Audit Tool for Long-Term Care Homes and Retirement Homes.

Sources: Minister’s Directive: COVID-19 response measures for long-term care homes, effective August 30, 2022; COVID-19 Guidance Document for Long-Term Care Homes in Ontario, updated April 3, 2023; Interviews with the IPAC Lead and other staff.

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