Ontario

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

Inspection Report Under the
Fixing Long-Term Care Act, 2021

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

Original Public Report

Report Issue Date: July 15, 2024
Inspection Number: 2024-1188-0003
Inspection Type:
Critical Incident
Follow up

Licensee: St. Joseph's Care Group
Long Term Care Home and City: Bethammi Nursing Home, Thunder Bay

Lead Inspector	**Inspector Digital Signature**
Christopher Amonson (721027)	

Additional Inspector(s)

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): June 24 - 27, 2024

The following intake(s) were inspected:
- One intake for a follow-up compliance order #001 issued for O. Reg. 246/22 - s. 140 (1) related to administration if drugs;
- One intake related to an alleged incident of neglect.

Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2024-1188-0001 related to O. Reg. 246/22, s. 140 (1) inspected by Christopher Amonson (721027)

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

- Medication Management
- Infection Prevention and Control
- Prevention of Abuse and Neglect

INSPECTION RESULTS

WRITTEN NOTIFICATION: Programs to be followed

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 11 (1) (b)
Policies, etc., to be followed, and records
s. 11 (1) Where the Act or this Regulation requires the licensee of a long-term care home to have, institute or otherwise put in place any plan, policy, protocol, program, procedure, strategy, initiative or system, the licensee is required to ensure that the plan, policy, protocol, program, procedure, strategy, initiative or system,
(b) is complied with.

The licensee has failed to ensure that where the Act required the licensee of a long-term care home to have, institute or otherwise put in place any program, the licensee was required to ensure that the program was complied with.

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Rationale and Summary
Pursuant to the Fixing Long-Term Care Act (FLTCA) 2021, section (s.) 11 (1) (b) the licensee was to ensure that there was an organized program of personal support services for the home to meet the assessed needs of the residents.

An incident occurred involving a resident having an unwitnessed fall. The Director of Care (DOC) confirmed that the resident's safety and care needs were not met in accordance with the homes personal support services program.

Sources: A Critical Incident report; Long-term Care (LTC) home investigation file; LTC home policy for Care and Comfort Rounds; interviews with DOC and staff. [721027]