

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

Central West District
609 Kumpf Drive, Suite 105
Waterloo, ON, N2V 1K8
Telephone: (888) 432-7901

Original Public Report

Report Issue Date: May 4, 2023	
Inspection Number: 2023-1170-0004	
Inspection Type: Critical Incident System	
Licensee: Caessant-Care Nursing and Retirement Homes Limited	
Long Term Care Home and City: Caessant Care Listowel Nursing Home, Listowel	
Lead Inspector April Racpan (218)	Inspector Digital Signature
Additional Inspector(s)	

INSPECTION SUMMARY

<p>The inspection occurred onsite on the following date(s): April 20, 21, 24, 25, 27, 28, 2023 and May 1, 2023.</p> <p>The following intakes were inspected:</p> <ul style="list-style-type: none"> Intake: #00016352 related to falls prevention and management and use of PASDs Intake: #00086076 related to prevention of abuse and neglect <p>The following intake related to falls prevention and management was completed in this inspection:</p> <ul style="list-style-type: none"> Intake: #00022043

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

- Infection Prevention and Control
- Prevention of Abuse and Neglect
- Falls Prevention and Management
- Restraints/Personal Assistance Services Devices (PASD) Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: PREVENTION OF ABUSE AND NEGLECT

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

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

The licensee has failed to ensure that a resident was protected from verbal abuse by a Personal Support Worker (PSW).

For the purposes of the Act and this regulation, “verbal abuse” means any form of verbal communication of a threatening or intimidating nature or any form of verbal communication of a belittling or degrading nature which diminishes a resident’s sense of well-being, dignity or self-worth, that is made by anyone other than a resident.

Rationale and Summary

A resident displayed responsive behaviours throughout the home area. A PSW made multiple comments that were intimidating and threatening towards the resident, in their attempt to redirect and distract the resident. Following the interaction, the resident was emotional and continued to display responsive behaviours for the remainder of the shift.

The PSW acknowledged that they made negative comments that were considered diminishing in nature towards the resident.

Sources: Critical Incident (CI) report, the home’s internal investigation records, resident's plan of care, progress notes, interviews with the PSW and other staff.

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WRITTEN NOTIFICATION: POLICY TO PROMOTE ZERO TOLERANCE

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

Non-compliance with: FLTCA, 2021, s. 25 (1)

The home has failed to ensure that the written policy to promote zero tolerance of abuse and neglect of

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residents, was complied with.

Rationale and Summary

The home's policy titled "Zero Tolerance of Abuse and Neglect Policy LTC" last reviewed April 2022, stated that an assessment of the resident was required to be completed upon awareness of an alleged abuse incident, to ensure the safety and comfort of the resident.

A resident was the recipient of verbal abuse by a PSW. They did not receive an assessment when the home became aware of the incident.

When the home did not follow their policy related to the completion of an assessment for the resident following an alleged incident of verbal abuse, it resulted in the home not being able to determine the level of negative impact to the resident.

Sources: Zero Tolerance of Abuse and Neglect Policy LTC, no policy#, last reviewed date April 2022, progress notes, interview with the DOC.

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