Ontario

Ministry of Health and Long-Term Care

Inspection Report under the Long-Term Care Homes Act, 2007

Ministère de la Santé et des Soins de longue durée

Rapport d'inspection sous la Loi de 2007 sur les foyers de soins de longue durée

Long-Term Care Homes Division
Long-Term Care Inspections Branch

Division des foyers de soins de longue durée
Inspection de soins de longue durée

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Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Oct 26, 2016	2016_389601_0028	026407-16, 026987-16, 028350-16, 029070-16	Critical Incident System

Licensee/Titulaire de permis

CENTENNIAL PLACE MILLBROOK INC.
307 Aylmer Street PETERBOROUGH ON K9L 7M4

Long-Term Care Home/Foyer de soins de longue durée

CENTENNIAL PLACE LONG-TERM CARE HOME
2 Centennial Lane North MILLBROOK ON M5J 2G2

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs

KARYN WOOD (601)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): October 17, 18, 19, 20 and 21, 2016.

The following critical incidents were inspected:

Log #026407-16 (2903-000022-16) regarding an alleged visitor to resident sexual abuse.

Log #026987-16 (2903-000023-16) regarding an alleged resident to resident abuse.

Log #029070-16 (2903-000029-16) regarding an alleged staff to resident abuse.

Log #028350-16 (2903-000025-16) regarding a fall that resulted in an injury and transfer to hospital.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, Registered Nurses (RN), Registered Practical Nurses (RPN), Personal Support Workers (PSW), Life Enrichment Worker and residents.

The inspector also toured the home, reviewed residents health care records, the licensee's critical incidents reports and investigation documentation.

The following Inspection Protocols were used during this inspection:
Falls Prevention
Prevention of Abuse, Neglect and Retaliation
Responsive Behaviours

During the course of this inspection, Non-Compliances were issued.
- **1 WN(s)**
- **0 VPC(s)**
- **0 CO(s)**
- **0 DR(s)**
- **0 WAO(s)**

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES	
Legend WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	Legendé WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (a requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA). The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD. Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 20. Policy to promote zero tolerance

Specifically failed to comply with the following:

s. 20. (1) Without in any way restricting the generality of the duty provided for in section 19, every licensee shall ensure that there is in place a written policy to promote zero tolerance of abuse and neglect of residents, and shall ensure that the policy is complied with. 2007, c. 8, s. 20 (1).

Findings/Faits saillants :

1. The licensee has failed to ensure that the home's written policy that promotes zero tolerance of abuse and neglect of residents was complied with.

Related to Log #029070-16:

The Assistant Director of Care submitted a Critical Incident to the Director fifteen days following an alleged staff to resident abuse incident. The Inspector reviewed the Critical Incident and identified that on the identified date and time, PSW #104 was providing resident #004 personal care. According to PSW #103, resident #004 became upset and PSW #104 shouted at the resident.

Review of licensee's policy "Abuse and Neglect – Zero Tolerance" HR-F-10 directs:

Staff will ensure that appropriate action is taken in response to any suspected incidents of resident abuse or neglect as outlined below. All staff members have an obligation to report any incident or suspected incident of resident abuse or neglect.

All employees are expected to be vigilant and immediately report suspected cases of resident abuse or neglect to their supervisor and complete a Resident Incident Report to fully document the circumstances.

The licensee's investigation documentation was reviewed by the Inspector during the inspection and identified that fifteen days following an alleged incident, PSW #103 brought forward concerns to the managers of the home an alleged abuse involving resident #004 by PSW #104. According to the investigation documentation, on the identified date and time, PSW#103 witnessed an alleged physical, verbal, and emotional abuse towards resident #004 by PSW#104. It was identified, that on the identified date and time PSW#103 did not report the allegations of physical, verbal, and emotional abuse to the Supervisor on shift.

During an interview, the Director of Care indicated to the Inspector that PSW #103 was found to have not complied with the reporting policy for abuse and neglect by not reporting the incident as soon as it was alleged to have occurred on the identified date.

LTCHA, 2007, s. 20(1) will be issued as a Written Notification as the licensee was issued Compliance Order #001, inspection #2016_270531_0025 related to s.19. (1). The

identified incident occurred prior to the date the Compliance Order was issued. [s. 20. (1)]

Issued on this 26th day of October, 2016

Signature of Inspector(s)/Signature de l’inspecteur ou des inspecteurs

Original report signed by the inspector.