



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 prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch
Division de la responsabilisation et de la performance du système de santé
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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Aug 10, 12, 2011, 2011_099188_0010, Mandatory Reporting

Licensee/Titulaire de permis

FINLANDIA NURSING HOME LIMITED
c/o Sudbury Finnish Rest Home, 233 Fourth Avenue, SUDBURY, ON, P3B-4C3

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

FINLANDIA HOIVAKOTI NURSING HOME LIMITED
233 FOURTH AVENUE, SUDBURY, ON, P3B-4C3

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

MELISSA CHISHOLM (188)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Mandatory Reporting inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Acting Assistant Director of Care (ADOC), Registered Nursing Staff, and Front Office Staff.

During the course of the inspection, the inspector(s) reviewed investigation reports as related to the mandatory reports, reviewed staffing schedule and reviewed the home's written policy related to zero tolerance of abuse and neglect.

The following Inspection Protocols were used in part or in whole during this inspection:

Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Definitions

WN - Written Notification
VPC - Voluntary Plan of Correction
DR - Director Referral
CO - Compliance Order
WAO - Work and Activity Order

Définitions

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.)

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.

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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 subsections:**

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 sayants :

1. Inspector reviewed the home's policy titled "Resident Abuse and Neglect - Zero-Tolerance". This policy states, "the alleged perpetrator(s) shall not have unnecessary and unsupervised contact with the alleged victim,...This may be accomplished by: - immediate suspension (with or without pay) of the alleged perpetrator pending results of the investigation, - re-assignment of the alleged perpetrator to another home area of the facility (i.e. non-resident area)." Inspector noted that allegations of abuse where brought forward to the licensee and the alleged perpetrator was not immediately issued a suspension or re-assigned to work in another home area of the facility. The licensee failed to comply with their policy titled "Resident Abuse and Neglect - Zero-Tolerance" by not issuing an immediate suspension to the alleged staff member and allowing unnecessary and unsupervised contact with the alleged victim. [LTCHA 2007, S.O. 2007, c.8., s.20(1)]

Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance ensuring their policy titled "Resident Abuse and Neglect - Zero-Tolerance" is complied with, to be implemented voluntarily.

WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 24. Reporting certain matters to Director

Specifically failed to comply with the following subsections:

s. 24. (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Director:

- 1. Improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident.**
- 2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident.**
- 3. Unlawful conduct that resulted in harm or a risk of harm to a resident.**
- 4. Misuse or misappropriation of a resident's money.**
- 5. Misuse or misappropriation of funding provided to a licensee under this Act or the Local Health System Integration Act, 2006. 2007, c. 8, ss. 24 (1), 195 (2).**

Findings/Faits sayants :

1. Inspector reviewed a Mandatory Report. The licensee became aware of the alleged abuse and did not immediately report the incident to the Director. The licensee failed to immediately report the suspicion of abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or risk of harm to the resident to the Director. [LTCHA 2007, S.O. 2007, c.8., s.24(1)]

2. Inspector reviewed a Mandatory Report. The licensee became aware of the alleged misappropriation of residents money and did not immediately report the incident to the Director. The licensee failed to immediately report the suspicion of misuse or misappropriation of a resident's money to the Director. [LTCHA 2007, S.O. 2007, c.8., s.24(1)]

Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance ensuring reports made to the Director are completed within the required time-frames, to be implemented voluntarily.

Issued on this 7th day of September, 2011

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

