



Ministry of Health and
Long-Term Care

Ministère de la Santé et des
Soins de longue durée

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

Rapport d'inspection prévue
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 rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Feb 21, 2019	2019_704682_0002	001734-17, 004773-17, 021360-17, 006337-18	Critical Incident System

Licensee/Titulaire de permis

The Regional Municipality of Niagara
1815 Sir Isaac Brock Way THOROLD ON L2V 4T7

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

Gilmore Lodge
50 Gilmore Road Fort Erie ON L2A 2M1

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

AILEEN GRABA (682), LISA BOS (683)

Inspection Summary/Résumé de l'inspection



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

This inspection was conducted on the following date(s): January 25, 28, 29, 2019.

The following Critical Incident inspections were conducted:

001734-17 related to prevention of abuse and neglect

004773-17 related to prevention of abuse and neglect

021360-17 related to prevention of abuse and neglect

006337-18 related to infection prevention and control

During the course of the inspection, the inspector(s) spoke with the Administrator; Director of Resident Care (DRC); personal support worker(s) (PSW).

During the course of the inspection, the inspector(s) observed the provision of care; reviewed clinical health records; meeting minutes; policies and procedures; critical incident system (CIS) submissions; investigative notes, staffing schedules and outbreak line listings.

The following Inspection Protocols were used during this inspection:

Infection Prevention and Control

Prevention of Abuse, Neglect and Retaliation

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

During the course of this inspection, Administrative Monetary Penalties (AMP) were not issued.

0 AMP(s)



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order AMP – Administrative Monetary Penalty	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités AMP – Administrative Monetary Penalty
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.
AMP (s) may be issued under section 156.1 of the LTCHA	AMP (s) may be issued under section 156.1 of the LTCHA

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 19. Duty to protect



Specifically failed to comply with the following:

s. 19. (1) Every licensee of a long-term care home shall protect residents from abuse by anyone and shall ensure that residents are not neglected by the licensee or staff. 2007, c. 8, s. 19 (1).

Findings/Faits saillants :

1. The licensee failed to ensure that all residents were protected from abuse by anyone. O. Reg 79/10, s. 2(1) defines verbal abuse as 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.

O. Reg. 79/10, s. 2(1) defines emotional abuse as any threatening, insulting, intimidating or humiliating gestures, actions, behaviour or remarks, including imposed social isolation, shunning, ignoring, lack of acknowledgement or infantilization that are performed by anyone other than a resident.

A review of the licensee policy titled: Abuse and Neglect- Zero Tolerance, Index No: RR00-001, identified the following on page four: "Responding and Post Investigation Procedures; 1. If investigation substantiates abuse and/or neglect, staff will be subject to discipline up to and including termination."

A review of Critical Incident (CI) log #004773-17 / M528-000007-17 identified concerns related to resident #003. As per the CI, on an identified date, resident's #003 substitute decision maker (SDM) reported to staff #105 that resident #003 expressed concerns regarding how their care was provided.

The home's internal investigation notes were reviewed. The investigative notes indicated that resident #003 requested assistance. Staff #104 responded and did not provide the assistance that was requested. This interaction ended with resident #003 upset. Resident #003 was identified as being confused after the incident.

During an interview on an identified date, staff #103 stated that resident #003 was dependent for assistance. During an interview on an identified date, Administrator #100 confirmed that resident #003 was not protected from verbal and/or emotional abuse by staff #104. [s. 19. (1)]



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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 to ensure that all residents are protected from abuse by anyone, to be implemented voluntarily.

Issued on this 22nd day of February, 2019

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

Original report signed by the inspector.