

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

Ottawa District
347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Original Public Report

Report Issue Date: July 19, 2024

Inspection Number: 2024-1557-0004

Inspection Type:

Complaint

Critical Incident

Licensee: The Corporation of the County of Hastings

Long Term Care Home and City: Hastings Centennial Manor, Bancroft

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): July 12, 15 - 18, 2024

The following intake(s) were inspected:

- Intake: #00116120 - CIS # M537-000012-24 - Alleged physical abuse of a resident by a staff.
- Intake: #00117465 - CIS # M537-000015-24 - Fall of resident resulting in injury.
- Intake: #00119250 - CIS # M537-000017-24 - Unexpected death of a resident.
- Intake: #00119938 - Complaint regarding resident care.

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The following Inspection Protocols were used during this inspection:

- Food, Nutrition and Hydration
- Medication Management
- Infection Prevention and Control
- Prevention of Abuse and Neglect
- Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of Care

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

Non-compliance with: FLTCA, 2021, s. 6 (7)

Plan of care

s. 6 (7) The licensee shall ensure that the care set out in the plan of care is provided to the resident as specified in the plan.

The licensee has failed to ensure that the care set out in the plan of care related to toileting for a resident was provided as specified in the plan.

Sources:

Resident record review, observation of a resident, interview with 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)

Policy to promote zero tolerance

s. 25 (1) Without in any way restricting the generality of the duty provided for in section 24, 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.

The licensee has failed to ensure that staff complied with their Zero Tolerance of Abuse and Neglect Policy. Staff did not immediately report the alleged abuse of a resident to an appropriate leadership team member.

Sources:

CIR, Resident's health care record, Licensee's investigation notes related to the alleged incident, Zero Tolerance of Abuse and Neglect Program, Policy, interviews with staff.