



**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 sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**Health System Accountability and  
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Performance Improvement and  
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**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
performance et de la conformité**

**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Jan 28, 2013	2013_185112_0006	L-000009-13	Complaint

**Licensee/Titulaire de permis**

MERITAS CARE CORPORATION  
567 VICTORIA AVENUE, WINDSOR, ON, N9A-4N1

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

FRANKLIN GARDENS LONG TERM CARE HOME  
24 FRANKLIN ROAD, LEAMINGTON, ON, N8H-4B7

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

CAROLE ALEXANDER (112)

**Inspection Summary/Résumé de l'inspection**



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The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): January 14, 2013

L-000009-13

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, the President of the Residents' Council and 2 residents.

During the course of the inspection, the inspector(s) reviewed the following: a critical incident, home's internal investigation, Resident Council minutes, policies and procedures for abuse prevention and related staff training

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

Findings of Non-Compliance were found during this inspection.

**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

Legend	Legendé
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	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.

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**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).**

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**Findings/Faits saillants :**

1. Documentation review confirmed allegations of abuse and neglect were made. [s. 19. (1)]

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**WN #2: 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).**

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**Findings/Faits saillants :**



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1. Allegations of verbal and physical abuse were reported. The allegations made were not all investigated by management.  
The home's policy was not followed.

The home's "Abuse Policy" page 5 of 7 states: "the alleged perpetrator(s) shall not have unnecessary and unsupervised contact with he alleged victim" In addition, the procedure for information gathering for the purpose in investigating was not conducted as per the home's policy. This was confirmed by both the Administrator and Director of Care. [s. 20. (1)]

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**Issued on this 28th day of January, 2013**

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

A handwritten signature in black ink, appearing to be "P. S. L.", written in a cursive style.