Ontario

Inspection Report Under the
Fixing Long-Term Care Act, 2021

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

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Public Report

Report Issue Date: May 9, 2025
Inspection Number: 2025-1497-0003
Inspection Type: Critical Incident
Licensee: Maxville Manor
Long Term Care Home and City: Maxville Manor, Maxville

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): May 5, 6, 8, 2025

The following intake(s) were inspected:

- Intake: #00143325/CI #3000-000013-25 - related to resident to resident physical abuse.

The following **Inspection Protocols** were used during this inspection:

Responsive Behaviours
Prevention of Abuse and Neglect

INSPECTION RESULTS

WRITTEN NOTIFICATION: Responsive behaviours

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.
Non-compliance with: O. Reg. 246/22, s. 58 (4) (c)

Responsive behaviours
s. 58 (4) The licensee shall ensure that, for each resident demonstrating responsive behaviours,
(c) actions are taken to respond to the needs of the resident, including assessments, reassessments and interventions and that the resident's responses to interventions are documented.

The licensee has failed to take actions to respond to a resident's responsive behaviours by ensuring that resident's responses to interventions and reassessments were documented.

The Dementia Observation System (DOS) mapping was initiated on a specific date in April 2025 for a resident, and there was no documentation on five day shifts, and no documentation on one night shift.

Sources: the resident's health record and DOS mapping, interview with PSWs, a RN and the ADOC.