



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

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

## Amended Public Report Cover Sheet (A2)

Amended Report Issue Date: January 20, 2025
Original Report Issue Date: November 12, 2024
Inspection Number: 2024-1571-0007 (A2)
Inspection Type: Critical Incident
Licensee: The Corporation of the County of Prince Edward
Long Term Care Home and City: H.J. McFarland Memorial Home, Picton

## AMENDED INSPECTION SUMMARY

This report has been amended to:  
Compliance Order (CO) #001 was rescinded as a result of a Director Review.

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## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): November 4-7, 12, 2024

The following intake(s) were inspected:

- Intake: #00128534 and Intake: #00128564: Alleged staff to resident Abuse.

The following Inspection Protocols were used during this inspection:

Infection Prevention and Control  
Prevention of Abuse and Neglect

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## AMENDED INSPECTION RESULTS

(A2)

The following order(s) has been rescinded: CO #001

### COMPLIANCE ORDER CO #001 Duty to protect

NC #001 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: FLTCA, 2021, s. 24 (1)

Duty to protect

s. 24 (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.

### COMPLIANCE ORDER CO #002 Policy to promote zero tolerance

NC #002 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

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 inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:

Specifically, the licensee must:

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1. Conduct education on the policy to promote zero tolerance of abuse and neglect of residents, with all direct care staff, with focus on the requirements for mandatory reporting.
2. Develop and complete an audit tool, to determine when abuse or neglect is reported, if it is reported immediately. The audit should be completed for a minimum of one month and include corrective actions taken when reporting is not immediate.
3. Maintain written a record of the requirements under (1) and (2).  
Documentation of education shall include the names of the staff, their designation, and date training was provided.

#### Grounds

The licensee has failed to ensure that their written policy related to zero tolerance of abuse and neglect of residents was complied with, for two residents of the Long-Term Care Home.

Specifically, staff did not comply with the licensee's Prevention of Abuse & Neglect of a Resident Policy #VII-G-IO.OO. All employees are required to immediately report any suspected or known incident of abuse or neglect to the Director of MLTC, the Director LTC, the Director of Care and the Charge Nurse of the Home.

Several PSW staff members were aware of suspected abuse of two residents, by a specified PSW, on a day in September, 2024 and October, 2024. This was not reported to the Director of Care until four days after the first incident.

Sources: Prevention of Abuse & Neglect of a Resident Policy #VII-G-IO.OO, Investigation Notes, Interviews with several PSW staff, DOC #102 and ADOC #104.

This order must be complied with by: January 13, 2025

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## REVIEW/APPEAL INFORMATION

**TAKE NOTICE** The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Long-Term Care  
438 University Avenue, 8<sup>th</sup> floor  
Toronto, ON, M7A 1N3

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e-mail: [MLTC.AppealsCoordinator@ontario.ca](mailto:MLTC.AppealsCoordinator@ontario.ca)

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:



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Health Services Appeal and Review Board  
Attention Registrar  
151 Bloor Street West, 9<sup>th</sup> Floor  
Toronto, ON, M5S 1S4

Director  
c/o Appeals Coordinator  
Long-Term Care Inspections Branch  
Ministry of Long-Term Care  
438 University Avenue, 8<sup>th</sup> Floor  
Toronto, ON, M7A 1N3  
e-mail: [MLTC.AppealsCoordinator@ontario.ca](mailto:MLTC.AppealsCoordinator@ontario.ca)

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website [www.hsarb.on.ca](http://www.hsarb.on.ca).