

Ministry of Long-Term Care

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

North District

159 Cedar St, Suite 403
Sudbury, ON, P3E 6A5
Telephone: (800) 663-6965

Public Report

Report Issue Date: January 31, 2025

Inspection Number: 2025-1325-0001

Inspection Type:

Critical Incident

Licensee: Huntsville Long Term Care Centre Inc.

Long Term Care Home and City: Muskoka Landing, Huntsville

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): January 27 to 30, 2025.

The following intake(s) were inspected:

- One intake related to an allegation of improper/incompetent care of resident, and
- Two intakes related to a fall incident of a resident that resulted in an injury.

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

Infection Prevention and Control
Prevention of Abuse and Neglect
Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of Care

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

Non-compliance with: FLTCA, 2021, s. 6 (1) (c)

Plan of care

s. 6 (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,

(c) clear directions to staff and others who provide direct care to the resident; and

The licensee has failed to ensure that the written plan of care for a resident, set out clear directions to staff and others who provided direct care to the resident, as it had differing information and the care plan update was delayed.

Sources: Inspector observations; review of the resident's health records; review of the home's policies; and interviews with the Director of Care (DOC) and other staff.

WRITTEN NOTIFICATION: Integration of assessments, care

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 6 (4) (a)

Plan of care

s. 6 (4) The licensee shall ensure that the staff and others involved in the different aspects of care of the resident collaborate with each other,

(a) in the assessment of the resident so that their assessments are integrated and are consistent with and complement each other; and

The licensee has failed to ensure that a specific staff member who was involved in the care of a resident, shared their assessment with others, in order to ensure that it was integrated, consistent with, and complemented other assessments for this resident.

Sources: Review of the resident's health records; review of the home's policy; and interview with the DOC, and other staff.

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WRITTEN NOTIFICATION: Oral Care Physical Assistance Not Provided

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 38 (1) (b)

Oral care

s. 38 (1) Every licensee of a long-term care home shall ensure that each resident of the home receives oral care to maintain the integrity of the oral tissue that includes, (b) physical assistance or cuing to help a resident who cannot, for any reason, brush their own teeth; and

The licensee has failed to ensure that a resident was provided with the required assistance for their oral care on a specified date by a staff member.

Sources: CI report; review of the resident's clinical records; observations; interview with the resident's power of attorney (POA), the DOC and other staff.

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