

**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

## Original Public Report

<b>Report Issue Date:</b> August 15, 2024
<b>Inspection Number:</b> 2024-1603-0003
<b>Inspection Type:</b> Critical Incident
<b>Licensee:</b> Board of Management of the District of Kenora
<b>Long Term Care Home and City:</b> Princess Court, Dryden

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): July 16-18, 2024

The inspection occurred offsite on the following date(s): July 22, 2024

The following intake(s) were inspected:

- One intake was related to abuse of a resident.
- One intake was related to a fall of a resident resulting in injury.
- One intake was related to an outbreak.

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

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

## INSPECTION RESULTS

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## WRITTEN NOTIFICATION: Retraining

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

**Non-compliance with: FLTCA, 2021, s. 82 (4)**

Training

s. 82 (4) Every licensee shall ensure that the persons who have received training under subsection (2) receive retraining in the areas mentioned in that subsection at times or at intervals provided for in the regulations.

The licensee has failed to ensure that the required annual Infection Prevention and Control (IPAC) training was completed by all staff.

### Rationale and Summary

A record review of the home's training records indicated that some staff did not complete their annual IPAC training for 2023.

In an interview with the Assistant Director of Care (ADOC), they confirmed that there is a gap in the completion of annual training.

**Sources:** Review of the home's annual IPAC training records; home's policy titled "Zero tolerance of abuse and/or neglect" last reviewed October 2023; and, an interview with the ADOC.

## WRITTEN NOTIFICATION: Infection prevention and control program

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

**Non-compliance with: O. Reg. 246/22, s. 102 (2) (b)**

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Infection prevention and control program

s. 102 (2) The licensee shall implement,

(b) any standard or protocol issued by the Director with respect to infection prevention and control. O. Reg. 246/22, s. 102 (2).

The licensee has failed to ensure that 9.1 (b) of the IPAC Standard for Long-Term Care Homes, revised September 2023 was implemented; specifically, the licensee has failed to ensure that a Personal Support Worker (PSW) conducted hand hygiene before and after contact with residents/residents' environment.

**Rationale and Summary**

A PSW was observed not conducting hand hygiene before and after contact with residents and their environment during dining service.

**Sources:** The home's "IPAC Routine Precautions" last reviewed December 2020; Observations during dining service; Interviews with the IPAC lead and other staff.

**COMPLIANCE ORDER CO #001 Duty to protect**

NC #003 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.

**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) Provide in-person training to all staff on the home's policy for the prevention of resident abuse and neglect. Training must include, but is not limited to:

- The types of abuse and the appropriate action in response to any suspected, alleged or witnessed incident of abuse and neglect;
- Procedures and interventions to assist and support residents who have been abused or neglected or allegedly abused or neglected;
- The potential for power imbalances between staff and residents and the potential for abuse and neglect by those in a position of trust, power and responsibility for resident care.

2) A documented record must be maintained of the education provided, who received the education, signature/s, date(s) of when the education was provided, as well as the contents of the education and training materials.

**Grounds**

The licensee has failed to ensure that a resident was protected from abuse.

**Rationale and Summary**

There were multiple allegations of resident abuse involving one resident in the home.

There was high risk of harm as the result of the home not ensuring the resident was protected from abuse.

**Sources:** A resident's health care records; the home's policy titled "Zero Tolerance of Abuse and/or Neglect, last reviewed October 2023; and, interviews with the DOC and other staff.

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**This order must be complied with by** September 23, 2024

**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

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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)

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

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order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

**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).