

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

Ottawa District
347 Preston Street, Suite 420
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Original Public Report

Report Issue Date: March 10, 2023	
Inspection Number: 2023-1502-0004	
Inspection Type: Complaint Follow up Critical Incident System	
Licensee: Providence Care Centre	
Long Term Care Home and City: Providence Manor, Kingston	
Lead Inspector Anna Earle (740789)	Inspector Digital Signature
Additional Inspector(s) Cathi Kerr (641)	

INSPECTION SUMMARY

<p>The inspection occurred on the following date(s): February 21 - 24, 27 - 28, and March 1 - 3, 2023</p> <p>The following intake(s) were inspected:</p> <ul style="list-style-type: none"> • Intake: #00011821-[CI:3005-000093] - Alleged resident to resident emotional abuse • Intake: #00012253-[CI:3005-000096-22] - Alleged staff to resident neglect • Intake: #00015677-[IL-08161-AH/CI:3005-000105-22] - Alleged staff to resident physical abuse • Intake: #00015702-[IL-08180-AH/CI:3005-000106-22] - Alleged staff to resident improper care • Intake: #00016019-[IL-08302-OT SN] - Complaint regarding air temperature, hydration, and elevator service • Intake: #00017474 - Follow-up inspection • Intake: #00017624-[IL-08952-AH/CI:3005-000004-23] - Alleged staff to resident abuse • Intake: #00017697-[CI:3005-000005-23] - Alleged staff to resident neglect • Intake: #00018972-[IL-09500-AH/CI:3005-000009-23] - Alleged resident to resident physical abuse • Intake: #00019055-[CI:3005-000010-23] - Resident fall with injury

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Previously Issued Compliance Order(s)

The following previously issued compliance Order was found to be in compliance: Order #001 from Inspection #2022-1502-0003 related to O.Reg. 246/22 - s. 55 (2) (b) (i) inspected by Cathi Kerr (#641).

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

- Skin and Wound Prevention and Management
- Food, Nutrition and Hydration
- Infection Prevention and Control
- Safe and Secure Home
- Prevention of Abuse and Neglect
- Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: Plan of Care

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

Non-compliance with: FLTCA, 2021, s. 6 (7)

The licensee has failed to ensure that the care set out in the plan of care was provided to a resident as specified in the plan.

Rational and Summary:

On January 21, 2023, a resident sustained a fall resulting in injury and transfer to hospital. A review of the resident's care plan for January 2023, indicated that the resident was to have hip protectors on when ambulating. Interview completed February 27, 2023, with Assistant Director of Care (ADOC) who confirmed the resident was not wearing hip protectors when ambulating at the time of the fall. Not following plan of care can increase the risk of resident(s) sustaining injury to themselves and/or others.

Sources: Resident care plan, and interview with Assistant Director of Care.
[740789]



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