

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 30, 2025

Inspection Number: 2025-1362-0001

Inspection Type:

Critical Incident

Licensee: St. Joseph's General Hospital Elliot Lake

Long Term Care Home and City: St. Joseph's Manor, Elliot Lake

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s):

January 27-30, 2025.

The following intake(s) were inspected:

- Intake: related to, late reporting and potential improper/ incompetent care of resident.

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

Infection Prevention and Control
Prevention of Abuse and Neglect
Reporting and Complaints

INSPECTION RESULTS

WRITTEN NOTIFICATION: Residents' Bill of Rights

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

Non-compliance with: FLTCA, 2021, s. 3 (1) 1.

Residents' Bill of Rights

s. 3 (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

1. Every resident has the right to be treated with courtesy and respect and in a way that fully recognizes the resident's inherent dignity, worth and individuality, regardless of their race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status or disability.

The licensee has failed to ensure that a staff member was respectful towards a resident.

Sources: Critical Incident report; investigation notes; interviews with staff.

WRITTEN NOTIFICATION: Policy to Promote Zero Tolerance Abuse

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

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 licensee has failed to ensure that staff complied with their written policy to promote zero tolerance of abuse.

Sources: Critical Incident report; Abuse policy titled, "Zero Tolerance of Abuse and Neglect"; investigation notes; interviews with staff.

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WRITTEN NOTIFICATION: Reporting Certain Matters to the Director

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

Non-compliance with: FLTCA, 2021, s. 28 (1) 1.

Reporting certain matters to Director

s. 28 (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Director:

1. Improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident.

The licensee has failed to ensure that when a person has reasonable grounds to suspect that an improper treatment or care of a resident that resulted in a risk of harm, was immediately reported to the Director.

Sources: Critical Incident report; investigation notes; interviews with staff.

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