

# 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

#### **Central East District**

33 King Street West, 4th Floor Oshawa, ON, L1H 1A1 Telephone: (844) 231-5702

	Original Public Report
Report Issue Date: May 2 <sup>nd</sup> , 2024	
Inspection Number: 2024-1116-0002	
Inspection Type:	
Proactive Compliance Inspection	
, , , , , , , , , , , , , , , , , , ,	
Licensee: Glen Hill Terrace Christian Homes Inc.	
Long Term Care Home and City: Glen Hill Strathaven, Bowmanville	
Lead Inspector	Inspector Digital Signature
Rodolfo Ramon (704757)	
Additional Inspector(s)	
Tiffany Forde (741746)	
,	

## **INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): March 26-28, 2024 and April 3, 4, 2024

The inspection occurred offsite on the following date(s): April 2, 2024

The following intake(s) were inspected:

• Intake: #00111161 – due to a Proactive Compliance Inspection - PCI

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

Skin and Wound Prevention and Management Resident Care and Support Services



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Food, Nutrition and Hydration
Medication Management
Residents' and Family Councils
Infection Prevention and Control
Safe and Secure Home
Quality Improvement
Pain Management
Falls Prevention and Management

## **INSPECTION RESULTS**

## WRITTEN NOTIFICATION: POSTING OF INFORMATION

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

Non-compliance with: FLTCA, 2021, s. 85 (3) (c)

Posting of information

s. 85 (3) The required information for the purposes of subsections (1) and (2) is, (c) the long-term care home's policy to promote zero tolerance of abuse and neglect of residents;

The licensee has failed to ensure that the home's policy to promote zero tolerance of abuse and neglect was posted in an accessible location.

### **Rationale and Summary**

During observations, the inspector was unable to locate the home's policy to promote zero tolerance of abuse and neglect of residents posted in the home. The administrator informed the inspector that the policy was required to be in a binder at the reception area. The inspector proceeded to request the binder with the policy from the reception staff, however they were unable to locate the binder with the policy.



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Not posting the home's policy to promote zero tolerance of abuse and neglect of residents in the home prevented visitors, family and residents from being informed about the home's processes.

Sources: Observations, Interview with the administrator.

[704757]

### WRITTEN NOTIFICATION: POSTING OF INFORMATION

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

Non-compliance with: O. Reg. 246/22, s. 265 (1) 10.

Posting of information

s. 265 (1) For the purposes of clause 85 (3) (s) of the Act, every licensee of a long-term care home shall ensure that the information required to be posted in the home and communicated to residents under section 85 of the Act includes the following: 10. The current version of the visitor policy made under section 267.

The licensee has failed to ensure that the visitor policy was posted in an accessible location.

### **Rationale and Summary**

During observations of the home, the inspector was unable to locate the visitor's policy posted in the home. The administrator informed the inspector that the visitor's policy was required to be in a binder at the reception area. The inspector proceeded to request the binder with the policy from the reception staff, however they were unable to locate the binder with the policy.

Not posting the visitor's policy in the home prevented visitors and residents from being informed about the home's processes.

**Sources:** Observations. Interview with the administrator.

[704757]