



**Ministry of Health and
Long-Term Care**

**Inspection Report under
the Long-Term Care
Homes Act, 2007**

**Ministère de la Santé et des
Soins de longue durée**

**Rapport d'inspection sous la
Loi de 2007 sur les foyers de
soins de longue durée**

**Long-Term Care Homes Division
Long-Term Care Inspections Branch**

**Division des foyers de soins de
longue durée
Inspection de soins de longue durée**

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Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / No de registre	Type of Inspection / Genre d'inspection
Jun 14, 2018	2018_624196_0015	012476-18	Critical Incident System

Licensee/Titulaire de permis

CVH (No. 9) GP Inc. as general partner of CVH (No. 9) LP
766 Hespeler Road, Suite 301 CAMBRIDGE ON N3H 5L8

Long-Term Care Home/Foyer de soins de longue durée

Southbridge Lakehead
135 South Vickers Street THUNDER BAY ON P7E 1J2

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs

LAUREN TENHUNEN (196)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Critical Incident System inspection.

This inspection was conducted on the following date(s): June 12 - 13, 2018

During the course of the inspection, the inspector(s) spoke with the Executive Director/Administrator, Food Service Manager (FSM), Personal Support Workers (PSWs), and the Resident Services Coordinator/Educator.

The inspector also reviewed the submitted Critical Incident System (CIS) report, an employee file, employee education records, investigation records and the licensee abuse policies, procedures and programs.

Ad-hoc notes were used during this inspection.

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)

NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (a requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 20. Policy to promote zero tolerance

Specifically failed to comply with the following:

s. 20. (1) Without in any way restricting the generality of the duty provided for in section 19, 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. 2007, c. 8, s. 20 (1).

Findings/Faits saillants :

1. The licensee failed to ensure that the written policy to promote zero tolerance of abuse and neglect of residents, was complied with.

A Critical Incident System (CIS) report was submitted to the Director for an incident of staff to resident verbal abuse. The report outlined comments made by Dietary Aide (DA) #102 on their personal social media account regarding residents and staff of the home.

The Inspector reviewed the licensee's policy titled "Zero Tolerance of Resident Abuse and Neglect Program – RC-02-01-01 - April 2017" which read "Verbal abuse – Any form of verbal communication of a threatening or intimidating nature or any form of verbal communication of a belittling or degrading nature which diminishes a resident's sense of well-being, dignity or self-worth, that is made by anyone other than a resident, or any form of verbal communication of a threatening or intimidating nature made by a resident that leads another resident to fear for his or her safety where the resident making the communication understands and appreciates its consequences."

The Inspector reviewed the licensee's policy titled "Extendicare Standards of Employee Conduct – 2001" which read "Employees will not threaten, intimidate or harass residents, their families, other employees/supervisors or others at the workplace or outside the workplace."

During an interview with Resident Services Coordinator/Educator #105, they reported to the Inspector that DA #102 had completed Surge learning titled "Extendicare Assist Zero Tolerance for Abuse and Neglect – Resident Bill of Rights and Zero Tolerance of Abuse and Neglect" in Spring 2018, and "Resident Care – Abuse prevention – Power Imbalance and Abuse Prevention" also in 2018. In addition, RSC #105 provided a copy of the "Acknowledgement – Code of Conduct" that had been signed by DA #102 in 2017.

During an interview with Food Service Manager (FSM) #104, they reported to the Inspector that DA #102 took to social media after a situation had occurred and made a threat towards residents and staff of the home.

During an interview with the ED/Administrator, they reported to the Inspector that DA #102 had not complied with and had violated both the licensee's policy titled "Zero Tolerance of Resident Abuse and Neglect Program" and the "Extendicare Standards of Employee Conduct." [s. 20. (1)]



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Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance that ensures the written policy to promote zero tolerance of abuse and neglect of residents, is complied with, to be implemented voluntarily.

Issued on this 14th day of June, 2018

Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs

Original report signed by the inspector.