

WENTWORTH LODGE

MINISTRY OF HEALTH AND LONG TERM CARE Inspection 2018\_689586\_0022

RQI Finding	Description	Action
<p>CO#001</p> <p>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</p>	<p>Failure to protect a resident from alleged sexual abuse committed by a family member while in the Lodge.</p> <p>MOHLTC has issued a Compliance Order that was then replaced with a Director's Order following a Home requested Director's review.</p> <p>The Director's Order outlines that the Home shall ensure all residents are protected from sexual abuse by anyone.</p> <p>The compliance plan must be aimed at protecting residents from abuse. The plan must include safeguarding measures and intervention strategies to be implemented by staff when there is reasonable grounds to suspect abuse towards a resident.</p>	<p>Review of Incident with all members of management team (complete July 23, 2018)</p> <p>Thorough review and discussion of MOHLTC expectations regarding abuse with all members of management team (complete July 23, 2018)</p> <p>Discussion with DON and NM about importance of immediate action/direction in response to report of abuse or suspicion of abuse. On-call expectations reviewed (complete July 23, 2018)</p> <p>Discussion with RNs at change of shift regarding abuse protocols (complete July 30, 2018)</p> <p>Email to all Lodge staff regarding allegation and staff expectations to uphold Zero Tolerance for Abuse (complete July 23, 2018)</p> <p>Review of Appeal process with all management team members &amp; update given regarding Police investigation to date (complete November 5, 2018)</p> <p>Review of Director's Order with all management team members upon receipt of same (complete December 4, 2018). Plan to complete Town Halls meetings in addition to communication already provided via emails/team meetings and communication meetings since incident.</p> <p>Thorough review with Nurse Leaders again as they are the first line of contact during work hours and after-hours via on-call process (complete December 4, 2018)</p> <p>Consultation with Sr. Administrator regarding plan of correction. Information to be discussed at Town Hall meetings to be shared with Nursing Leadership at Macassa Lodge (complete December 5, 2018)</p>

		<p>Town Hall meetings conducted with staff over a 2 week period to review Director's Order. 16 sessions completed and approximately 190 staff participated before December 31, 2018 which represents majority of staff (complete December 19, 2018)</p> <p>Mandatory Reporting hand-outs available in all depts. till end of 2018 for staff review (complete December 31, 2018)</p> <p>Town Hall presentation included review of:</p> <ul style="list-style-type: none"><li>• Categories of Mandatory Reporting</li><li>• Who is a Supervisor in the lodge</li><li>• Reporting timelines</li><li>• Ministry reporting procedures and timelines</li><li>• Types of Abuse</li><li>• Who can be an abuser</li><li>• Police involvement</li><li>• Strategies/measures to ensure safety of residents</li><li>• Staff support for reporting</li></ul> <ul style="list-style-type: none"><li>• Ongoing review at upcoming communication meetings, annual mandatory training 2019, team meetings</li><li>• Mandatory training in 2019 at both Lodges to include Mandatory Reporting Handout and review of learnings (March 2019)</li><li>• Policy and procedure review and revision (completed December 21, 2018)</li><li>• Welcome Packages include revised policy (Complete Dec 31, 2018)</li></ul>
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