

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 prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division Performance Improvement and Compliance Branch Division de la responsabilisation et de la performance du système de santé

Direction de l'amélioration de la performance et de la

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Public Copy/Copie du public

Date(s) of inspection/Date(s) de l'inspection

Inspection No/ No de l'inspection

Type of Inspection/Genre d'inspection

Jun 13, 14, 21, 2012

conformité

2012 054133 0025

Critical Incident

Licensee/Titulaire de permis

COUNTY OF RENFREW

9 INTERNATIONAL DRIVE, PEMBROKE, ON, K8A-6W5

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

MIRAMICHI LODGE

725 Pembroke Street West, PEMBROKE, ON, K8A-8S6

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

JESSICA LAPENSEE (133)

Inspection Summary/Résumé de l'inspection

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

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care and a Resident Care Coordinator

During the course of the inspection, the inspector(s) Reviewed a Critical Incident Report, reviewed the home's documentation related to the investigation into this reported Critical Incident, reviewed components of a residents' health care record, reviewed the policy to promote zero tolerance of abuse and neglect of residents titled "Prevention of Abuse or Neglect" (#G-006, revision date Feb 14/12), reviewed the policy titled "Staff Reporting and Whistle-Blowing Protection" (#G-007, revision date Feb 14/12), reviewed training records relating to these two policies for one staff person.

The following Inspection Protocols were used during this inspection: Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES



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Legend	Legendé
DR – Director Referral CO – Compliance Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1)	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 23. Licensee must investigate, respond and act

Specifically failed to comply with the following subsections:

s. 23. (2) A licensee shall report to the Director the results of every investigation undertaken under clause (1) (a), and every action taken under clause (1) (b). 2007, c. 8, s. 23 (2).

Findings/Faits saillants:

1. On a day in January 2012, alleged verbal abuse of resident #1 was reported to Resident Care Coordinator #S100. An investigation was immediately undertaken, the Director was immediately notified of the allegation, and action was taken by the home. The results of the abuse investigation were however not reported to the Director.

Issued on this 21st day of June, 2012

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

Jessica Lopensée