

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

Toronto District

5700 Yonge Street, 5th Floor Toronto, ON, M2M 4K5 Telephone: (866) 311-8002

Public Report

Report Issue Date: January 28, 2025

Inspection Number: 2025-1709-0001

Inspection Type:

Complaint

Critical Incident

Licensee: Humber Meadows Long-Term Care Home

Long Term Care Home and City: Humber Meadows Long-Term Care Home, Toronto

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): January 16 - 17, 20 - 24, 27 and 28, 2025.

The following Critical Incident System (CIS) intakes were inspected:

Intake: #00131663, CIS #3065-000067-24 related to improper care of a resident.
Intake: #00135109, CIS #3065-000074-24, Intake: #00135718, CIS #3065-000079-24 and Intake: #00135866, CIS #3065-000080-24 related to disease outbreaks.

•Intake: #00135466, CIS #3065-000076-24/3065-000077-24, related to alleged neglect of a resident.

The following CIS intake was completed:

•Intake: #00133316, CIS #3065-000070-24 related to fall prevention program.



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The following Complaint intake was inspected:

•Intake: #00129423, related to complaints about care provided to a resident.

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

Resident Care and Support Services Continence Care Infection Prevention and Control Reporting and Complaints Falls Prevention and Management

INSPECTION RESULTS

WRITTEN NOTIFICATION: When reassessment, revision is required

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

Non-compliance with: FLTCA, 2021, s. 6 (10) (b)

Plan of care

s. 6 (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,(b) the resident's care needs change or care set out in the plan is no longer necessary.

The licensee has failed to ensure that a resident was reassessed, and the plan of care was reviewed and revised related to discontinuation of an intervention.

Sources: The resident's care plan, progress notes and interview with a registered staff member.



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[704758]

WRITTEN NOTIFICATION: Dealing with complaints

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

Non-compliance with: O. Reg. 246/22, s. 108 (1) 1.

Dealing with complaints

s. 108 (1) Every licensee shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

1. The complaint shall be investigated and resolved where possible, and a response that complies with paragraph 3 provided within 10 business days of the receipt of the complaint, and where the complaint alleges harm or risk of harm including, but not limited to, physical harm, to one or more residents, the investigation shall be commenced immediately.

The licensee has failed to ensure that a resident's verbal complaint about the care they received was investigated.

Sources: The resident's progress notes, interviews with staff members.

[739633]

WRITTEN NOTIFICATION: Dealing with complaints

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

Non-compliance with: O. Reg. 246/22, s. 108 (1) 3. i.

Dealing with complaints

s. 108 (1) Every licensee shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:



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3. The response provided to a person who made a complaint shall include, i. the Ministry's toll-free telephone number for making complaints about homes and its hours of service and contact information for the patient ombudsman under the Excellent Care for All Act, 2010.

The licensee has failed to ensure that the response provided to a person who made a complaint related to a resident's care and alleged neglect included the Ministry's toll-free telephone number for making complaints about homes and its hours of service and contact information for the patient ombudsman under the Excellent Care for All Act, 2010.

Sources: The home's complaint record, and interview with a staff member.

[704758]

WRITTEN NOTIFICATION: Dealing with complaints

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 108 (1) 3. ii. A.

Dealing with complaints

s. 108 (1) Every licensee shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

3. The response provided to a person who made a complaint shall include,

ii. an explanation of,

A. what the licensee has done to resolve the complaint.

The licensee has failed to ensure that the response provided to a person who made a complaint related to a resident's care and alleged neglect included an explanation of what the licensee has done to resolve the complaint.

Sources: The home's complaint record and interview with a staff member.

[704758]