

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

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

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

**Division des opérations relatives aux  
soins de longue durée  
Inspection de soins de longue durée**

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<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / No de registre</b>	<b>Type of Inspection / Genre d'inspection</b>
Feb 18, 2021	2021_617148_0001	010398-20	Follow up

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**Licensee/Titulaire de permis**

The Glebe Centre Incorporated  
950 Bank Street Ottawa ON K1S 5G6

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

Glebe Centre  
950 Bank Street Ottawa ON K1S 5G6

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

AMANDA NIXON (148)

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**Inspection Summary/Résumé de l'inspection**

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**The purpose of this inspection was to conduct a Follow up inspection.**

**This inspection was conducted on the following date(s): January 11-15, 18-21 and 27, 2021, as an off-site inspection.**

**This inspection was conducted to follow up on Compliance Order #001 from Inspection 2020\_617148\_0007 issued May 22, 2020, related to the duty to protect residents from abuse and neglect.**

**During the course of the inspection, the inspector(s) spoke with the Executive Director, Director of Quality Management and Director of Care.**

**The Inspector reviewed the licensee's policy to promote zero tolerance of abuse and neglect of residents, a summary of complaints and concerns and records of required training for abuse and neglect.**

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

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

**1 WN(s)**

**0 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**

**The following previously issued Order(s) were found to be in compliance at the time of this inspection:**

**Les Ordre(s) suivants émis antérieurement ont été trouvés en conformité lors de cette inspection:**

REQUIREMENT/ EXIGENCE	TYPE OF ACTION/ GENRE DE MESURE	INSPECTION # / DE L'INSPECTION	NO	INSPECTOR ID #/ NO DE L'INSPECTEUR
LTCHA, 2007 S.O. 2007, c.8 s. 19. (1)	CO #001	2020_617148_0007		148

**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

Legend	Légende
<p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</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>

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**WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 101.  
Conditions of licence**

**Specifically failed to comply with the following:**

**Conditions of licence**

**s. 101. (3) It is a condition of every licence that the licensee shall comply with this Act, the Local Health System Integration Act, 2006, the Connecting Care Act, 2019, the regulations, and every directive issued, order made or agreement entered into under this Act and those Acts.**

**Findings/Faits saillants :**

1. The licensee has failed to comply with Compliance Order (CO) #001 from Inspection #2020\_617148\_0007 served on May 22, 2020 with a compliance due date of October 31, 2020.

The evaluation to determine the effectiveness of the licensee's policy to promote zero tolerance of abuse and neglect of residents was not developed or implemented.

A revision was not made to the policy to promote zero tolerance of abuse and neglect of residents to ensure that the policy provides for the manner in which allegations of abuse and neglect will be investigated, including who will undertake the investigation.

Source: Interviews with the Executive Director and Director of Quality Management [s. 101. (3)]

**Issued on this 24th day of February, 2021**

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

**Original report signed by the inspector.**