

Ministry of Long-Term Care

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

London District

130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

Original Public Report

Report Issue Date: October 22, 2024

Inspection Number: 2024-1136-0006

Inspection Type:

Critical Incident

Licensee: Caessant-Care Nursing and Retirement Homes Limited

Long Term Care Home and City: Caessant Care on Mary Bucke, St Thomas

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): October 16, 17, 18, 21, 2024

The following intake(s) were inspected:

- Intake: #00123231 -CIS 2627-000016-24 - related to an allegation of abuse
- Intake: #00124225 -CIS 2627-000017-24 - related to an allegation of neglect
- Intake: #00126190- CIS 2627-000018-24 - related to a fall

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

Resident Care and Support Services
Infection Prevention and Control
Prevention of Abuse and Neglect
Falls Prevention and Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Duty to protect

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

Non-compliance with: FLTCA, 2021, s. 24 (1)

Duty to protect

s. 24 (1) 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.

The licensee has failed to ensure that a resident was protected from verbal abuse by a staff member.

Summary and Rationale

A resident reported to staff in the home that a staff member had made derogatory comments to them.

Verbal abuse is defined by Ontario Regulation 246/22 as "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." The home's Zero Tolerance of Abuse and Neglect Policy (Effective August 2024) also included this same definition.

The Executive Director said that the home substantiated the allegations of verbal abuse.

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Sources: the home's investigation notes, clinical records for a resident, and interviews with the and other staff.

WRITTEN NOTIFICATION: Policy to promote zero tolerance

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

Non-compliance with: FLTCA, 2021, s. 25 (1)

Policy to promote zero tolerance

s. 25 (1) Without in any way restricting the generality of the duty provided for in section 24, 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.

The licensee has failed to ensure that they complied with their written policy to promote zero tolerance of abuse and neglect of residents.

Rationale/Summary

A Critical Incident System (CIS) report was received by the Director, as a result of suspected resident neglect. According to the CIS report, staff members did not listen to the resident's concerns regarding their care. The resident's clinical records indicated that resident reported their concerns to a staff member in the home, however, the staff member did not report the concerns.

The home's policy titled "Zero Tolerance of Abuse and Neglect Procedure" (reviewed/effective August 2024) stated that "All staff must immediately report to the registered staff suspected or witnessed incidents of: abuse of a resident by anyone, neglect of a resident by the licensee, a staff member (or affiliate) of the home, and anything else provided for in the regulations" as well as "This policy applies to all staff, contractors, students, volunteers, families, visitors, and individuals

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that are involved with the care of the resident and/or the safe operation of Caressant Care."

The staff member acknowledged that they did not report the resident's concern, immediately, but should have as per the home's policy. The Executive Director confirmed that the staff member did not report the resident 's concern as per the home's mandatory reporting procedure within the Zero Tolerance of Abuse and Neglect policy.

There was an increased risk to a resident when their concern was not immediately reported as per the home's policy.

Sources: CIS report, Review of a resident's clinical records, Zero Tolerance for Prevention of Abuse and Neglect (reviewed August 2024) Policy, home's investigation notes, interview the ED and other staff.



**Inspection Report Under the
Fixing Long-Term Care Act, 2021**

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