



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

**Rapport d'inspection  
prévus le Loi de 2007  
les foyers de soins de  
longue durée**

**Ministry of Health and Long-Term Care**

Health System Accountability and Performance Division  
Performance Improvement and Compliance Branch

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**Ministère de la Santé et des Soins de  
longue durée**

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<b>Dates of inspection/Date de l'inspection</b> November 29 <sup>th</sup> , 30 <sup>th</sup> 2010	<b>Inspection No/ d'inspection</b> 2010_188_2829_29Nov090313	<b>Type of Inspection/Genre d'inspection</b> Mandatory Report CI-2829-000037-10 CI-2829-000039-10 Log # S-00574 & S-00578
<b>Licensee/Titulaire</b> Finlandia Nursing Home Limited, c/o Sudbury Finnish Rest Home, 233 Fourth Avenue, Sudbury, Ontario, P3B 4C3, Fax:705-524-5943		
<b>Long-Term Care Home/Foyer de soins de longue durée</b> Finlandia Hoivakoti Nursing Home Limited, 233 Fourth Avenue, Sudbury, Ontario, P3B 4C3, Fax:705-524-5723		
<b>Name of Inspectors/Nom de l'inspecteurs</b> Melissa Chisholm 188 Anne Costeloe 177		
<b>Inspection Summary/Sommaire d'inspection</b>		
<p>The purpose of this inspection was to conduct a Mandatory Report inspection.</p> <p>During the course of the inspection, the inspectors spoke with: the Administrator, Director of Care (DOC), 3 Registered Nursing staff, 3 Personal Support Workers (PSW), 1 Housekeeping aid, 1 Dietary Aid and 1 Activation Aid.</p> <p>During the course of the inspection, the inspectors: Conducted a walk-through of all resident home areas and various common areas. Observed the resident named in the mandatory report. Observed other staff-resident interactions throughout the home. Interviewed a variety of staff in relation to education on prevention of abuse and neglect. Reviewed the following:</p> <ul style="list-style-type: none"> <li>• Policies and procedures related to prevention of abuse and neglect.</li> <li>• Training schedules, in-servicing records and content of educational sessions.</li> <li>• Home's orientation process, related to prevention of resident abuse and neglect</li> </ul> <p>The following Inspection Protocols were used during this inspection: Critical Incident Response Prevention of Abuse, Neglect and Retaliation</p> <p>Findings of Non-Compliance were found during this inspection. The following action was taken:</p> <p>2 WN</p>		

**NON- COMPLIANCE / (Non-respectés)**
**Definitions/Définitions**

**WN** – Written Notifications/Avis écrit  
**VPC** – Voluntary Plan of Correction/Plan de redressement volontaire  
**DR** – Director Referral/Régisseur envoyé  
**CO** – Compliance Order/Ordres de conformité  
**WAO** – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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.)

Le suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

**WN #1:** The Licensee has failed to comply with O.Reg 79/10, s. 107 (3) 4. The licensee shall ensure that the Director is informed of the following incidents in the home no later than one business day after the occurrence of the incident, followed by the report required under subsection (4): 4. An injury in respect of which a person is taken to hospital.

**Findings:**

1. The incident occurred on October 18<sup>th</sup>, 2010 at 1800h. The resident sustained an injury and was transferred to hospital.
2. This incident was first reported to the ministry via the Critical Incident System on October 25<sup>th</sup>, 2010 at 1355h. This is not in accordance with the required time frame of one business day after the occurrence.

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**WN #2:** The Licensee has failed to comply with O.Reg 79/10, s. 96 (e). Every licensee of a long-term care home shall ensure that the licensee's written policy under section 20 of the Act to promote zero tolerance of abuse and neglect of residents, (e) identifies the training and retraining requirements for all staff, including, (i) training on the relationship between power imbalances between staff and residents and the potential for abuse and neglect by those in a position of trust, power and responsibility for resident care, and (ii) situations that may lead to abuse and neglect and how to avoid such situations.

**Findings:**

1. Inspectors reviewed home's policy No. NM-S-1 titled "Resident Abuse and Neglect-Zero Tolerance". This policy does not identify the training and retraining requirements for all staff, including, (i) training on the relationship between power imbalances between staff and residents and the potential for abuse and neglect by those in a position of trust, power and responsibility for resident care, and (ii) situations that may lead to abuse and neglect and how to avoid such situations.
2. Inspector 177 interviewed the DOC November 30<sup>th</sup>, 2010 to review the home's policy No. NM-S-1 titled "Resident Abuse and Neglect-Zero Tolerance". DOC confirmed that the policy does not contain these required elements.


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le *Loi de 2007 les  
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<b>Signature of Licensee or Representative of Licensee</b> <b>Signature du Titulaire du représentant désigné</b>	<b>Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.</b>  
<b>Title:</b>  <b>Date:</b>	<b>Date of Report: (if different from date(s) of inspection).</b>  