



**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 sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**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 conformité**

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**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Dec 17, 2013	2013_139163_0041	S-000086-13	Critical Incident System

**Licensee/Titulaire de permis**

**BLIND RIVER DISTRICT HEALTH CENTRE  
525 Causley Street, P.O. Box 970, BLIND RIVER, ON, P0R-1B0**

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

**BLIND RIVER DISTRICT HEALTH CENTRE - ELDCAP UNIT  
525 CAUSLEY STREET, P.O. BOX 970, BLIND RIVER, ON, P0R-1B0**

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

**DIANA STENLUND (163)**

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



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

**This inspection was conducted on the following date(s): December 11-12, 2013**

**This inspection report also applies to the LTC Unit of the Blind River District Health Centre, home #2865.**

**During the course of the inspection, the inspector(s) spoke with the Registered Nurse Manager, registered nursing staff, personal support workers and residents.**

**During the course of the inspection, the inspector(s) walked through resident home areas, reviewed resident health care records, observed staff to resident care and interactions, and reviewed home policies.**

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

**Findings of Non-Compliance were found during this inspection.**

<b>NON-COMPLIANCE / NON - RESPECT DES EXIGENCES</b>	
<b>Legend</b>	<b>Legendé</b>
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	WAO – Ordres : travaux et activités



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.)

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

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.

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 O.Reg 79/10, s. 96. Policy to promote zero tolerance**

**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,**

- (a) contains procedures and interventions to assist and support residents who have been abused or neglected or allegedly abused or neglected;**
- (b) contains procedures and interventions to deal with persons who have abused or neglected or allegedly abused or neglected residents, as appropriate;**
- (c) identifies measures and strategies to prevent abuse and neglect;**
- (d) identifies the manner in which allegations of abuse and neglect will be investigated, including who will undertake the investigation and who will be informed of the investigation; and**
- (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. O. Reg. 79/10, s. 96.****

**Findings/Faits saillants :**



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1. On December 12, 2013 the inspector reviewed the home's policy to promote zero tolerance of abuse and neglect of residents. The inspector interviewed the Registered Nurse (RN) Manager about the home's written policy to promote zero tolerance of abuse and neglect of residents. The RN Manager confirmed that the home's written policy under section 20 of the Act to promote zero tolerance of abuse and neglect of residents, does not identify measures and strategies to prevent abuse and neglect. [s. 96. (c)]

2. On December 12, 2013 the inspector reviewed the home's policy to promote zero tolerance of abuse and neglect of residents. The inspector interviewed the Registered Nurse (RN) Manager about the home's written policy to promote zero tolerance of abuse and neglect of residents. The RN Manager confirmed that the home's written policy does not identify (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. The licensee has failed to ensure that the home's written policy under section 20 of the Act to promote zero tolerance of abuse and neglect of residents identifies (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. [s. 96. (e)]

***Additional Required Actions:***

***VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure the home's written policy under section 20 of the Act, to promote zero tolerance of abuse and neglect towards residents, identifies measures and strategies to prevent abuse and neglect, and identifies i) training and retraining requirements for all staff including 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, to be implemented voluntarily.***

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**Issued on this 17th day of December, 2013**

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

*Diana Bentlund, #163*