

Ministry of Long-Term Care

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

Ottawa District

347 Preston Street, Suite 410
Ottawa, ON, K1S 3J4
Telephone: (877) 779-5559

Original Public Report

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|---|------------------------------------|
| Report Issue Date: April 10, 2024 | |
| Inspection Number: 2024-1558-0001 | |
| Inspection Type: Complaint Critical Incident | |
| Licensee: The Corporation of the County of Hastings | |
| Long Term Care Home and City: Hastings Manor Home for the Aged, Belleville | |
| Lead Inspector Darlene Murphy (103) | Inspector Digital Signature |
| Additional Inspector(s) | |

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 27-28, 2024 and April 2-4, 2024.

The following intake(s) were inspected:

- Intake: #00108630 -(CIS#M538-000008-24) and Intake: #00108781 - (CIS#M538-000010-24)- resident falls that resulted in an injury.
- Intake: #00108680 -(CIS#M538-000009-24) - Unexpected resident death,
- Intake: #00111778 -(CIS#M538-000021-24)- Written letter of complaint related to resident care,
- Intake: #00109693 - Complaint related to Infection, Prevention and Control (IPAC) measures and resident mechanical lifts.

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

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

INSPECTION RESULTS

Non-Compliance Remedied

Non-compliance was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: O. Reg. 246/22, s. 107

Complaints procedure: licensee

s. 107. Every licensee of a long-term care home shall ensure that the written procedures required under clause 26 (1) (a) of the Act incorporate the requirements set out in section 108 of this Regulation.

The licensee has failed to ensure the complaints policy included written procedures that incorporated the requirements outlined in section 108 of the regulations.

Rationale and Summary:

The home received a written complaint that alleged harm to a resident. The home's complaints policy/procedure, "Resident and Family Complaints", last revised

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February 13, 2023, was reviewed and failed to comply with the regulations. Specifically, the policy/procedure did not outline that the response provided to the complainant shall include an explanation of what the licensee had done to resolve the complaint or that the licensee believed the complaint to be unfounded, together for the reasons for this belief.

Failing to ensure the written complaints policy is compliant with the legislative requirements potentially impacts the information shared with the complainants regarding the home's action to address the concerns.

Sources:

Policy/Procedure: "Resident and Family Complaints", interview with Director Long-Term Care.
[103]

Date Remedy Implemented: April 2, 2024