

**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**

<b>Report Issue Date:</b> February 22, 2024	
<b>Inspection Number:</b> 2024-1570-0001	
<b>Inspection Type:</b> Proactive Compliance Inspection	
<b>Licensee:</b> United Counties of Leeds and Grenville	
<b>Long Term Care Home and City:</b> Maple View Lodge, Athens	
<b>Lead Inspector</b> Darlene Murphy (103)	<b>Inspector Digital Signature</b>
<b>Additional Inspector(s)</b> Anna Earle (740789)	

**INSPECTION SUMMARY**

<p>The inspection occurred onsite on the following date(s): February 6-9, 12-14, 2024</p> <p>The following intake(s) were inspected:</p> <ul style="list-style-type: none"> <li>Intake: #00108056 - PCI</li> </ul>
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The following **Inspection Protocols** were used during this inspection:

- Skin and Wound Prevention and Management
- Resident Care and Support Services
- Residents' and Family Councils
- Food, Nutrition and Hydration
- Medication Management

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Infection Prevention and Control  
Safe and Secure Home  
Prevention of Abuse and Neglect  
Quality Improvement  
Residents' Rights and Choices  
Pain Management  
Falls Prevention and Management

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Retraining

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

**Non-compliance with: FLTCA, 2021, s. 82 (4)**

Training

s. 82 (4) Every licensee shall ensure that the persons who have received training under subsection (2) receive retraining in the areas mentioned in that subsection at times or at intervals provided for in the regulations.

The Licensee has failed to ensure that the persons who received training under subsection (2) received retraining in the areas mentioned in that subsection at times or at intervals provided for in the regulations.

**Rationale and Summary:**

In accordance with O Reg 246/22 s. 260 (1), the intervals for the purposes of subsection 82 (4) of the Act are annual intervals.

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A review was completed of staff retraining specifically related to prevention of abuse and mandatory reporting for 2023 and 15.5 percent of staff did not complete the required retraining. During an interview, with the Director of Care (DOC), they acknowledged that not all staff completed the annual retraining related to abuse and mandatory reporting.

Failure of staff not completing annual retraining regarding abuse and mandatory reporting could have a negative impact on the residents.

**Sources:**

Education records of staff for 2023 related to prevention of abuse and neglect and an interview with DOC.  
[740789]

**WRITTEN NOTIFICATION: Additional Training-Direct Care Staff**

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

**Non-compliance with: O. Reg. 246/22, s. 261 (2) 1.**

Additional training — direct care staff

s. 261 (2) The licensee shall ensure that all staff who provide direct care to residents receive the training provided for in subsection 82 (7) of the Act based on the following:

1. Subject to paragraph 2, the staff must receive annual training in all the areas required under subsection 82 (7) of the Act.

The licensee failed to ensure staff received annual training in the area of pain management, fall prevention and wound and skin care.

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**Rationale and Summary:**

In accordance with the Fixing Long-Term Care Act, 2021, staff are required to receive annual training in specified areas. During an interview with a Registered Practical Nurse (RPN), they stated they had not received recent training in the area of pain management, fall prevention and skin and wound care. The staff education summary for 2023 was reviewed and demonstrated the majority of staff had not completed training in these three areas. The DOC indicated this gap had been identified and additional measures were now in place to ensure the mandatory annual training would be completed by all staff.

Failure to ensure annual staff training is completed in the area of pain management, fall prevention and skin and wound care puts residents at risk of harm.

**Sources:**

Interviews with an RPN and the DOC, review of the education summary of Surge learning for 2023.

[103]