

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

Report Issue Date: December 2, 2024

Inspection Number: 2024-1570-0004

Inspection Type:
Critical Incident

Licensee: United Counties of Leeds and Grenville

Long Term Care Home and City: Maple View Lodge, Athens

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): November 26-28, 2024

The following intake(s) were inspected:

- Intake: #00129316/CI#M554-000022-24 was related to alleged physical abuse of a resident by staff.

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

Infection Prevention and Control
Prevention of Abuse and Neglect

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

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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 failed to protect a resident on a day in October 2024, when they reported alleged abuse. A staff member did not comply with the home's abuse policy and did not notify their supervisor and take the necessary steps to intervene immediately and remove the alleged abuser from the resident.

Sources: record review of a resident's clinical record, the home's Investigation File, and the home's Prevention of Abuse and Neglect of a Resident policy and procedure; and interviews with a resident and staff.

WRITTEN NOTIFICATION: Reporting certain matters to Director.

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

Non-compliance with: FLTCA, 2021, s. 28 (1) 2.

Reporting certain matters to Director

s. 28 (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Director:

2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident.

A staff member failed to immediately report to the Director an incident of alleged abuse of a resident that occurred on a day in October 2024.

Sources: record review of resident's clinical record, the home's Investigation File and the home's Resident Incident Reporting policy and procedure; and interviews with staff.



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

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