

#### **Ministry of Long-Term Care**

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

#### **North District**

159 Cedar St, Suite 403 Sudbury, ON, P3E 6A5 Telephone: (800) 663-6965

## **Public Report**

Report Issue Date: May 28, 2025

Inspection Number: 2025-1325-0003

Inspection Type:

Critical Incident

**Licensee:** Huntsville Long Term Care Centre Inc.

Long Term Care Home and City: Muskoka Landing, Huntsville

## **INSPECTION SUMMARY**

The inspection occurred onsite on the following date(s): May 26th, to May 28th, 2025

The following intake(s) were inspected:

- Two intakes related to improper transfers.
- One intake related to the abuse of a resident.

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

Resident Care and Support Services Responsive Behaviours 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)



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Duty to protect

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 ensure that a resident was protected from abuse by another resident.

Sources: Resident progress notes, care plan, investigation notes; and interviews with staff.

## WRITTEN NOTIFICATION: Responsive behaviours

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

Non-compliance with: O. Reg. 246/22, s. 58 (4) (b)

Responsive behaviours

s. 58 (4) The licensee shall ensure that, for each resident demonstrating responsive behaviours,

(b) strategies are developed and implemented to respond to these behaviours, where possible; and

The licensee failed to ensure that strategies developed to respond to behaviours were implemented. Specifically, a resident required an intervention identified for responsive behaviours. An incident occurred due to the resident not having the identified intervention in place.

Sources: Resident progress notes, care plan, investigation notes; and interviews with staff.

# COMPLIANCE ORDER CO #001 Transferring and positioning techniques



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NC #003 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

#### Non-compliance with: O. Reg. 246/22, s. 40

Transferring and positioning techniques

s. 40. Every licensee of a long-term care home shall ensure that staff use safe transferring and positioning devices or techniques when assisting residents.

## The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:

The Licensee shall:

a. Develop and implement an audit for the involved resident, to ensure the resident is being transferred with the appropriate transfer device.

b. Conduct and document the audit weekly for a period of four weeks including who conducted the audit, the date, and any corrective action taken as a result of the audit.

c. Conduct a documented review of all residents who require specific equipment for transferring, to ensure their plan of care accurately reflects the specific equipment required to perform a safe transfer.

#### Grounds

The licensee failed to ensure that staff utilized safe transferring and positioning devices or techniques when assisting two different residents.

a) Staff failed to utilize specific equipment while transferring a resident as per their plan of care. This incident resulted in the resident sustaining a fall.

b) Staff utilized an incorrect transfer device while transferring a resident with specific equipment. This incident resulted in the resident sustaining a fall.

Sources: Resident progress notes, care plan, investigation notes; and interviews with staff.

This order must be complied with by August 21, 2025



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## **REVIEW/APPEAL INFORMATION**

**TAKE NOTICE**The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

(a) the portions of the order or AMP in respect of which the review is requested;(b) any submissions that the licensee wishes the Director to consider; and(c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

#### Director

c/o Appeals Coordinator Long-Term Care Inspections Branch Ministry of Long-Term Care 438 University Avenue, 8<sup>th</sup> floor Toronto, ON, M7A 1N3 e-mail: <u>MLTC.AppealsCoordinator@ontario.ca</u>



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If service is made by:

(a) registered mail, is deemed to be made on the fifth day after the day of mailing (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.

(c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

(a) An order made by the Director under sections 155 to 159 of the Act.

(b) An AMP issued by the Director under section 158 of the Act.

(c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

#### **Health Services Appeal and Review Board**

Attention Registrar 151 Bloor Street West, 9<sup>th</sup> Floor Toronto, ON, M5S 1S4



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#### Director

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Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website <u>www.hsarb.on.ca</u>.