



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 prévue le Loi de 2007 les foyers de soins de longue

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch
Division de la responsabilisation et de la performance du système de santé
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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Oct 2, 3, 4, 18, 19, 21, 2011; 2011\_057163\_0017; Mandatory Reporting

Licensee/Titulaire de permis

913096 ONTARIO LIMITED
1202 Highway 94, R.R. #1, Corbeil, ON, P0H-1K0

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

NIPISSING MANOR NURSING CARE CENTER
1202 Highway 94, Box 40, Corbeil, ON, P0H-1K0

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

DIANA STENLUND (163)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Mandatory Reporting inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care (DOC), registered dietitian (RD), registered staff, personal support workers (PSWs), dietary aids, and residents

During the course of the inspection, the inspector(s) observed staff to resident interactions and care, reviewed health care documentation, home's policies and procedures, training records and Critical Incident System (CIS) documentation.

The following Inspection Protocols were used during this inspection:

Accommodation Services - Maintenance

Nutrition and Hydration

Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

<b>Legend</b>  WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	<b>Legendé</b>  WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité 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 LTCHA, 2007 S.O. 2007, c.8, s. 76. Training**
**Specifically failed to comply with the following subsections:**
**s. 76. (2) Every licensee shall ensure that no person mentioned in subsection (1) performs their responsibilities before receiving training in the areas mentioned below:**

1. The Residents' Bill of Rights.
2. The long-term care home's mission statement.
3. The long-term care home's policy to promote zero tolerance of abuse and neglect of residents.
4. The duty under section 24 to make mandatory reports.
5. The protections afforded by section 26.
6. The long-term care home's policy to minimize the restraining of residents.
7. Fire prevention and safety.
8. Emergency and evacuation procedures.
9. Infection prevention and control.
10. All Acts, regulations, policies of the Ministry and similar documents, including policies of the licensee, that are relevant to the person's responsibilities.
11. Any other areas provided for in the regulations. 2007, c. 8, s. 76. (2).

**Findings/Faits saillants :**

1. The licensee has not ensured that staff receive training on the home policy to promote zero tolerance of abuse and neglect of residents prior to performing their responsibilities. The inspector interviewed the registered dietitian (RD) on October 3, 2011. It was reported "I have not had any training on abuse, but there was a pamphlet that was posted that I was supposed to read". As reported to the inspector by the RD, the RD has worked at Nipissing Manor since 1997. The inspector interviewed the Administrator and DOC on October 4, 2011. It was verified that the RD had not received training on the home's policy to promote zero tolerance of abuse and neglect of residents prior to performing work responsibilities.

**Issued on this 21st day of October, 2011**



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

*Diana Genlund*