

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

Ministry of Long-Term Care

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

Central West District

609 Kumpf Drive, Suite 105 Waterloo, ON, N2V 1K8 Telephone: (888) 432-7901

Public Report

Report Issue Date: February 24, 2025

Inspection Number: 2025-1112-0001

Inspection Type:

Complaint

Critical Incident

Licensee: Revera Long Term Care Inc.

Long Term Care Home and City: Pinecrest Manor, Lucknow

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): February 19-21, 24, 2025.

The following intake(s) were inspected:

- Intake: #00136060, related to infection prevention and control,
- Intake: #00137614, related to prevention of abuse and neglect,
- Intake: #00138356, complaint related to the care of a resident.

The following Inspection Protocols were used during this inspection:

Infection Prevention and Control Prevention of Abuse and Neglect Reporting and Complaints

INSPECTION RESULTS



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WRITTEN NOTIFICATION: Dealing With Complaints

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

Non-compliance with: O. Reg. 246/22, s. 108 (1) 1.

Dealing with complaints

s. 108 (1) Every licensee shall ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home is dealt with as follows:

1. The complaint shall be investigated and resolved where possible, and a response that complies with paragraph 3 provided within 10 business days of the receipt of the complaint, and where the complaint alleges harm or risk of harm including, but not limited to, physical harm, to one or more residents, the investigation shall be commenced immediately.

The licensee has failed to ensure that when resident #001's Power of Attorney (POA) made a verbal complaint, on January 26, 2025, written complaints, on January 27 and February 2, 2025, to the Director of Care (DOC), related to missing dentures, oral care and footcare, there was a response that complies with paragraph 3 provided within 10 business days of the receipt of the complaint.

Sources: Interviews with resident #001's family member, emails from resident's POA and interviews with the DOC and Executive Director. [615]

WRITTEN NOTIFICATION: Dealing With Complaints

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

Non-compliance with: O. Reg. 246/22, s. 108 (2)

Dealing with complaints

s. 108 (2) The licensee shall ensure that a documented record is kept in the home that includes,

(a) the nature of each verbal or written complaint;



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(b) the date the complaint was received;

(c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;(d) the final resolution, if any;

(e) every date on which any response was provided to the complainant and a description of the response; and

(f) any response made in turn by the complainant.

The licensee has failed to ensure that when they received complaints concerning the care of a resident, that they maintained a documented records with all the requirements under the Regulations.

Sources: Resident #001's POA emails, resident #001's progress notes, interviews with the DOC and the ED.

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