



**Ministry of Health and  
Long-Term Care**

**Ministère de la Santé et des  
Soins de longue durée**

**Inspection Report under  
the Long-Term Care  
Homes Act, 2007**

**Rapport d'inspection sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**Health System Accountability and  
Performance Division  
Performance Improvement and  
Compliance Branch**

**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
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**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Jul 8, 2014	2014_320576_0006	S-000169-14	Complaint

**Licensee/Titulaire de permis**

THE CORPORATION OF THE CITY OF THUNDER BAY  
c/o Dawson Court, 523 Algoma Street North, THUNDER BAY, ON, P7A-5C2

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

PIONEER RIDGE  
750 TUNGSTEN STREET, THUNDER BAY, ON, P7B-6R1

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

MARSHA RIVERS (576)

**Inspection Summary/Résumé de l'inspection**



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**The purpose of this inspection was to conduct a Complaint inspection.**

**This inspection was conducted on the following date(s): May 26, 27, 28, 2014.**

**This inspection was conducted concurrently with Inspection  
#2014\_320576\_0005.**

**During the course of the inspection, the inspector(s) spoke with the  
Administrator, the Director of Nursing, registered staff, and personal support  
workers.**

**During the course of the inspection, the inspector(s) conducted a walk-through  
of resident home areas, reviewed resident health care records, reviewed the  
home's policy to promote zero tolerance of abuse and neglect of residents, and  
reviewed the home's Responsive Behaviours Program.**

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

**Findings of Non-Compliance were found during this inspection.**



**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	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. 20. Policy to promote zero tolerance**



**Specifically failed to comply with the following:**

**s. 20. (2) At a minimum, the policy to promote zero tolerance of abuse and neglect of residents,**

**(a) shall provide that abuse and neglect are not to be tolerated; 2007, c. 8, s. 20 (2).**

**(b) shall clearly set out what constitutes abuse and neglect; 2007, c. 8, s. 20 (2).**

**(c) shall provide for a program, that complies with the regulations, for preventing abuse and neglect; 2007, c. 8, s. 20 (2).**

**(d) shall contain an explanation of the duty under section 24 to make mandatory reports; 2007, c. 8, s. 20 (2).**

**(e) shall contain procedures for investigating and responding to alleged, suspected or witnessed abuse and neglect of residents; 2007, c. 8, s. 20 (2).**

**(f) shall set out the consequences for those who abuse or neglect residents; 2007, c. 8, s. 20 (2).**

**(g) shall comply with any requirements respecting the matters provided for in clauses (a) through (f) that are provided for in the regulations; and 2007, c. 8, s. 20 (2).**

**(h) shall deal with any additional matters as may be provided for in the regulations. 2007, c. 8, s. 20 (2).**

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**Findings/Faits saillants :**

1. Inspector #576 reviewed the home's policy to promote zero tolerance of abuse and neglect of residents, titled "Abuse & Neglect". Inspector noted that the policy does not deal with the abuse of a resident by another resident. The policy does not define what constitutes resident to resident abuse, does not provide for procedures for investigating and responding to alleged, suspected or witnessed abuse of a resident by another resident and does not set out the consequences for those residents who abuse other residents. The Administrator confirmed that the home's policy to promote zero tolerance of abuse and neglect of residents does not deal with resident to resident abuse.

The licensee failed to ensure that its policy to promote zero tolerance of abuse and neglect of residents clearly sets out what constitutes abuse and neglect, contains procedures for investigating and responding to alleged, suspected or witnessed abuse and neglect of residents and sets out the consequences for those who abuse residents. [s. 20. (2)]



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**WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s.  
79. Posting of information**



Specifically failed to comply with the following:

**s. 79. (3) The required information for the purposes of subsections (1) and (2) is,**

**(a) the Residents' Bill of Rights; 2007, c. 8, s. 79 (3)**

**(b) the long-term care home's mission statement; 2007, c. 8, s. 79 (3)**

**(c) the long-term care home's policy to promote zero tolerance of abuse and neglect of residents; 2007, c. 8, s. 79 (3)**

**(d) an explanation of the duty under section 24 to make mandatory reports; 2007, c. 8, s. 79 (3)**

**(e) the long-term care home's procedure for initiating complaints to the licensee; 2007, c. 8, s. 79 (3)**

**(f) the written procedure, provided by the Director, for making complaints to the Director, together with the name and telephone number of the Director, or the name and telephone number of a person designated by the Director to receive complaints; 2007, c. 8, s. 79 (3)**

**(g) notification of the long-term care home's policy to minimize the restraining of residents, and how a copy of the policy can be obtained; 2007, c. 8, s. 79 (3)**

**(h) the name and telephone number of the licensee; 2007, c. 8, s. 79 (3)**

**(i) an explanation of the measures to be taken in case of fire; 2007, c. 8, s. 79 (3)**

**(j) an explanation of evacuation procedures; 2007, c. 8, s. 79 (3)**

**(k) copies of the inspection reports from the past two years for the long-term care home; 2007, c. 8, s. 79 (3)**

**(l) orders made by an inspector or the Director with respect to the long-term care home that are in effect or that have been made in the last two years; 2007, c. 8, s. 79 (3)**

**(m) decisions of the Appeal Board or Divisional Court that were made under this Act with respect to the long-term care home within the past two years; 2007, c. 8, s. 79 (3)**

**(n) the most recent minutes of the Residents' Council meetings, with the consent of the Residents' Council; 2007, c. 8, s. 79 (3)**

**(o) the most recent minutes of the Family Council meetings, if any, with the consent of the Family Council; 2007, c. 8, s. 79 (3)**

**(p) an explanation of the protections afforded under section 26; 2007, c. 8, s. 79 (3)**

**(q) any other information provided for in the regulations. 2007, c. 8, s. 79 (3)**

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**Findings/Faits saillants :**



1. On May 27, 2014, Inspector #576 conducted a walk-through of the home and was unable to locate a posted copy of the home's policy to promote zero tolerance of abuse and neglect of residents. On May 28, 2014, Inspector #576, the Director of Nursing, and the Administrator conducted a walk-through of the home and were unable to locate where the home's policy to promote zero tolerance of abuse and neglect of residents was posted. The Director of Nursing and the Administrator confirmed that the home's policy to promote zero tolerance of abuse and neglect of residents was not posted in the home in a conspicuous and easily accessible location.

The licensee failed to ensure that the home's policy to promote zero tolerance of abuse and neglect of residents was posted in the home, in a conspicuous and easily accessible location. [s. 79. (3) (c)]

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**Issued on this 28th day of July, 2014**

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