

Ministry of Long-Term Care

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

Central East District

33 King Street West, 4th Floor Oshawa, ON, L1H 1A1 Telephone: (844) 231-5702

Public Report

Report Issue Date: February 7, 2025

Inspection Number: 2025-1083-0001

InspectionType:

Critical Incident Follow up

Licensee: Revera Long Term Care Inc.

Long Term Care Home and City: Thorntonview, Oshawa

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): February 3, 4, 5, 6, 7 2025

The following intake(s) were inspected:

- Intake: #00130153 -Follow-up #01-CO#001/2024_1083_0004, FLTCA, 2021 s. 28 (1) 2., Duty to Protect CDD January 31, 2025
- Intake: #00130154 Follow-up #01 -CO #002 /2024-1083-0004 O. Reg.
- 246/22 s. 102 (2) (b), Infection Prevention and Control, CDD January 31, 2025Intake: #00134624 -CI#2534-000053-24 Medication incident
- Intake: #00134712 Follow-up #01 CO #001/2024-1083-0005, FLTCA, 2021 s. 24 (1) Reporting certain matters to the Director, CDD January 31, 2025Intake: #00135099 - CI#2534-000055-24 - Financial abuse of resident by staff

Previously Issued ComplianceOrder(s)



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The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2024-1083-0004 related to FLTCA, 2021, s. 28 (1) 2. Order #002 from Inspection #2024-1083-0004 related to O. Reg. 246/22, s. 102 (2) (b)

Order #001 from Inspection #2024-1083-0005 related to FLTCA, 2021, s. 24 (1)

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

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

INSPECTION RESULTS

WRITTEN NOTIFICATION: POLICE RECORD CHECKS

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

Non-compliance with: O. Reg. 246/22, s. 254 (5)

Exceptions

s. 254 (5) If a staff member was hired or a volunteer was accepted during a pandemic before this section came into force and no police record check that complied with subsections 215 (2) and (3) of Ontario Regulation 79/10 (General) made under the former Act was provided to the licensee, the licensee shall ensure that a police record check that complies with subsections 252 (2) and (3) of this Regulation is provided to the licensee within three months after this section comes into force and the licensee shall keep the results of the record check in accordance with the requirements in section 278 or 279 as applicable.



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The licensee failed to ensure that a police record check was made for a staff member within 3 months of the O. Reg 246/22 coming into force.

A CIS report was submitted by the home related to alleged financial abuse of resident by a staff member. The administrator stated that the staff member was hired at the time of a pandemic and confirmed that no police check was found in the staff's file.

Sources: Review of the staff file, and interview with the Administrator.



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