

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: April 8, 2025

Inspection Number: 2025-1398-0002

Inspection Type:

Complaint

Critical Incident

Follow up

Licensee: Victoria Village Inc.

Long Term Care Home and City: Victoria Village Manor, Barrie

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 25, 26, 27, 28, 31, 2025 and April 1, 2, 3, 7, 8, 2025

The following intake(s) were inspected:

- Intake: #00138622 Complaint related to staff.
- Intake: #00140336 Follow-up #2 CO # 001 / 2024-1398-0004, O. Reg. 246/22 s. 93 (2) (b) (iii), CDD January 13, 2025, RIF \$500
- Intake: #00140346/ CI #2914-00005-25; and Intake: #00144033/ CI #2914-000010-25 - physical abuse resident to resident
- Intake: #00142410 Complaint related to temperatures and snack.

Previously Issued Compliance Order(s)

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

Order #001 from Inspection #2024-1398-0004 related to O. Reg. 246/22, s. 93 (2)



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(b) (iii)

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

Resident Care and Support Services
Housekeeping, Laundry and Maintenance Services
Infection Prevention and Control
Safe and Secure Home
Prevention of Abuse and Neglect
Residents' Rights and Choices

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)

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 physical abuse by another resident.

Section 2 of the Ontario Regulation 246/22 defines physical abuse as "the use of physical force by a resident that causes physical injury to another resident".

A physical altercation occurred between residents and one of them was injured.

Sources: Critical Incident Report, Residents clinical record, and interviews with Staff



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WRITTEN NOTIFICATION: Responsive Behaviour

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

Non-compliance with: O. Reg. 246/22, s. 58 (1) 3.

Responsive behaviours

- s. 58 (1) Every licensee of a long-term care home shall ensure that the following are developed to meet the needs of residents with responsive behaviours:
- 3. Resident monitoring and internal reporting protocols.

The Licensee failed to ensure that the monitoring and internal reporting protocols were completed for a resident's Dementia Observation Sheet (DOS) tracking.

In accordance with O. Reg 246/22, s. 11 (1) (b), the licensee is required to ensure that written policies developed for the Responsive Behaviour Management program are complied with. Specifically, the home's Responsive Behaviour policy indicates that staff shall complete DOS tracking on every shift.

DOS charting should have been completed for seven days as ordered by the doctor so that if a new behaviour occurred or if the behaviour worsened, it can be tracked or monitored to determine further interventions. The DOS documentation for a resident was incomplete on multiple occasions.

As such, not documenting the responsive behaviours on the DOS document may have potentially put the resident at risk of improper assessment.

Sources: DOS Tracking Sheet VII-F-30.20, resident's health records, Interviews with staff members. The home's Responsive Behaviours Policy # VII-F-30.00, Original Issue: November 2013, Past Revisions July 2017; December 2019, Current Revision March 2023.



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NOTICE OF RE-INSPECTION FEE Pursuant to section 348 of O. Reg. 246/22 of the Fixing Long-Term Care Act, 2021, the licensee is subject to a re-inspection fee of \$500.00 to be paid within 30 days from the date of the invoice.

A re-inspection fee applies since this is, at minimum, the second follow-up inspection to determine compliance with the following Compliance Order(s) under s. 155 of the FLTCA, 2021, and/or s. 153 of the LTCHA, 2007.

CO complied

Licensees must not pay a Re-Inspection Fee from a resident-care funding envelope provided by the Ministry [i.e., Nursing and Personal Care (NPC); Program and Support Services (PSS); and Raw Food (RF)]. By submitting a payment to the Minister of Finance, the licensee is attesting to using funds outside a resident-care funding envelope to pay the Re-Inspection Fee.