

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

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

 Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
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Date(s) of Inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
Sep 13, 17, 18, 2012	2012_099188_0036	Critical Incident

Licensee/Titulaire
THE LADY MINTO HOSPITAL AT COCHRANE
241 EIGHTH STREET, P.O. BOX 4000, COCHRANE, ON, P0L-1C0

Long-Term Care Home/Foyer de soins de longue durée
VILLA MINTO
241 EIGHTH STREET, P.O. BOX 280, COCHRANE, ON, P0L-1C0

Name of Inspector(s)/Nom de l'inspecteur(s)
MELISSA CHISHOLM (188)

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a Critical Inspection.

During the course of the inspection, the inspector spoke with: the Director of Care, Registered Nursing Staff (RN/RPN), Personal Support Workers (PSW) and residents

During the course of the inspection, the inspector conducted a walk through of resident care areas, observed staff to resident interactions, reviewed health care records and reviewed various policies and procedures.]

The following Inspection Protocols were used during this inspection:

- Falls Prevention
- Prevention of Abuse, Neglect and Retaliation
- Sufficient Staffing

This report was issued originally on September 18, 2012 by Inspector (188)

On December 17, 2012, O Reg 79/10. 417/12 was filed which amended O Reg. 79/10, s. 45.1, 2 (2) under the Long-Term Care Homes Act 2007. As a result of this amendment, the original inspection report issued by Inspector # 188 on September 18, 2012 is amended and the WN # 1 has been rescinded.

NON-COMPLIANCE / (Non-respectés)
Definitions/Définitions

WN – Written Notifications/Avis écrit
VPC – Voluntary Plan of Correction/Plan de redressement volontaire
DR – Director Referral/Régisseur envoyé
CO – Compliance Order/Ordres de conformité
WAO – Work and Activity Order/Ordres: travaux et activités

The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

Le suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de les foyers de soins de longue durée.

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.)

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans le loi comprend les exigences contenues dans les points énumérés dans la définition de "exigence prévue par la présente loi" au paragraphe 2(1) de la loi.

WN # 2: 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 subsections:

- 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;**
 - (b) shall clearly set out what constitutes abuse and neglect;**
 - (c) shall provide for a program, that complies with the regulations, for preventing abuse and neglect;**
 - (d) shall contain an explanation of the duty under section 24 to make mandatory reports;**
 - (e) shall contain procedures for investigating and responding to alleged, suspected or witnessed abuse and neglect of residents;**
 - (f) shall set out the consequences for those who abuse or neglect residents;**
 - (g) shall comply with any requirements respecting the matters provided for in clauses (a) through (f) that are provided for in the regulations; and**
 - (h) shall deal with any additional matters as may be provided for in the regulations. 2007, c. 8, s. 20 (2).**

Findings:

1. Inspector reviewed the home's written policy that promotes zero tolerance of abuse and neglect of residents titled "Resident Abuse Prevention, Reporting & Elimination" dated March 24, 2010. Inspector noted that the policy does not contain an explanation of the duty under section 24 of the Act to make mandatory reports. The licensee failed to ensure that the home's written policy that promotes zero tolerance of abuse and neglect of residents meets the requirements of the LTCHA s.20(2). [LTCHA 2007, S.O. 2007, c.8, s.20(2)]
2. Inspector reviewed the home's written policy that promotes zero tolerance of abuse and neglect of residents titled "Resident Abuse Prevention, Reporting & Elimination" dated March 24, 2010. Inspector noted that the policy does not provide for a program, that complies with the regulations, for preventing abuse and neglect. The licensee failed to ensure that the home's written policy that promotes zero tolerance of abuse and neglect of residents meets the requirements of the LTCHA s.20(2). [LTCHA 2007, S.O. 2007, c.8, s.20(2)]

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WN # 3: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 24. Reporting certain matters to Director

Specifically failed to comply with the following subsections:

- s. 24. (1) A person who has reasonable grounds to suspect that any of the following has occurred or may occur**

shall immediately report the suspicion and the information upon which it is based to the Director:

1. Improper or incompetent treatment or care of a resident that resulted in harm or a risk of harm to the resident.
2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident.
3. Unlawful conduct that resulted in harm or a risk of harm to a resident.
4. Misuse or misappropriation of a resident's money.
5. Misuse or misappropriation of funding provided to a licensee under this Act or the Local Health System Integration Act, 2006. 2007, c. 8, ss. 24 (1), 195 (2). (d) shall contain an explanation of the duty under section 24 to make mandatory reports;
- (e) shall contain procedures for investigating and responding to alleged, suspected or witnessed abuse and neglect of residents;
- (f) shall set out the consequences for those who abuse or neglect residents;
- (g) shall comply with any requirements respecting the matters provided for in clauses (a) through (f) that are provided for in the regulations; and
- (h) shall deal with any additional matters as may be provided for in the regulations. 2007, c. 8, s. 20 (2).

Findings:

1. Inspector reviewed a critical incident report. Inspector noted that the allegations of verbal abuse were reported to the Director outside of the immediate reporting time frame. The licensee failed to ensure that the Director is immediately informed of allegations of abuse of a resident by anyone. [LTCHA 2007, S.O. 2007, c.8, s.24(1)(2)]

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- WN # 4:** The Licensee has failed to comply with O.Reg 79/10, s. 96. Policy to promote zero tolerance
Every licensee of a long-term care home shall ensure that the licensee's written policy under section 20 of the Act to promote zero tolerance of abuse and neglect of residents,
- (a) contains procedures and interventions to assist and support residents who have been abused or neglected or allegedly abused or neglected;
 - (b) contains procedures and interventions to deal with persons who have abused or neglected or allegedly abused or neglected residents, as appropriate;
 - (c) identifies measures and strategies to prevent abuse and neglect;
 - (d) identifies the manner in which allegations of abuse and neglect will be investigated, including who will undertake the investigation and who will be informed of the investigation; and
 - (e) identifies the training and retraining requirements for all staff, including,
 - (i) training on the relationship between power imbalances between staff and residents and the potential for abuse and neglect by those in a position of trust, power and responsibility for resident care, and
 - (ii) situations that may lead to abuse and neglect and how to avoid such situations. O. Reg. 79/10, s. 96.

Findings:

1. Inspector reviewed the home's written policy that promotes zero tolerance of abuse and neglect of residents titled "Resident Abuse, Prevention, Reporting & Elimination" dated March 24, 2010. Inspector noted that the policy does identify that staff will receive annual and ongoing education, however fails to identify staff will receive training and retraining on the relationship between power imbalances between staff and residents and the potential for abuse and neglect by those in a position of trust, power and responsibility for resident care, and situations that may lead to abuse and neglect and how to avoid such situations. The licensee failed to ensure that the home's written policy that promotes zero tolerance of abuse and neglect of residents meets the requirements of O.Reg s.96. [O. Reg. 79/10, s.96(e)]

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Amended on this 4th day of January, 2013.

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

