



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

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

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

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

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**

**Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée**

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## **Public Copy/Copie du public**

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<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>
May 12, 2016	2016_195166_0013	003234-16, 013588-16, 013918-16	Critical Incident System

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### **Licensee/Titulaire de permis**

OAKWOOD RETIREMENT COMMUNITIES INC.  
325 Max Becker Drive Suite 201 KITCHENER ON N2E 4H5

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

THE VILLAGE OF TAUNTON MILLS  
3800 Brock Street North WHITBY ON L1R 3A5

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

CAROLINE TOMPKINS (166)

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



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**The purpose of this inspection was to conduct a Critical Incident System inspection.**

**This inspection was conducted on the following date(s): May 2 and May 3, 2016**

**Critical incident Logs 03234-16,013588-16 and 013918-16, related to resident to resident abuse were inspected concurrently**

**During the course of the inspection, the inspector(s) spoke with Residents, Registered Nurses(RN), Registered Practical Nurses(RPN), Physician, Personal Care Aides(PCA), RAI Coordinator, Behaviourial Support Team members(BSO), Neighbourhood Coordinators, Assistant General Manager and the Director of Nursing Care.**

**During the course of the inspection, the inspector observed resident to resident interactions, reviewed residents' clinical health records and the licensee's investigation documentation.**

**The following Inspection Protocols were used during this inspection:  
Prevention of Abuse, Neglect and Retaliation**

**During the course of this inspection, Non-Compliances were issued.**

**1 WN(s)**

**0 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**



**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).	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.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	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. 24. Reporting certain matters to Director**



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

**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. 2007, c. 8, s. 24 (1), 195 (2).**
- 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. 2007, c. 8, s. 24 (1), 195 (2).**
- 3. Unlawful conduct that resulted in harm or a risk of harm to a resident. 2007, c. 8, s. 24 (1), 195 (2).**
- 4. Misuse or misappropriation of a resident's money. 2007, c. 8, s. 24 (1), 195 (2).**
- 5. Misuse or misappropriation of funding provided to a licensee under this Act or the Local Health System Integration Act, 2006. 2007, c. 8, s. 24 (1), 195 (2).**

**Findings/Faits saillants :**

1. Related to 003234-16

The licensee has failed to ensure that the person who had reasonable grounds to suspect that any abuse of a resident has occurred or may occur, immediately report the suspicion and the information upon which it was based to the Director.

A Critical Incident(CIR) was received reporting that resident #004 and #005 were seen sitting together when resident #004 was observed attempting to touch resident #005 inappropriately. The residents were separated immediately.

Documentation indicated the residents' physician became aware of the incident when he read the documentation written by RN#114. The physician immediately reported the incident to the licensee.

RN #114, who was charge nurse and who was informed of the incident, documented the incident in the residents' clinical records but did not immediately inform the Director of the the alleged resident to resident abuse.

The licensee was issued a Compliance Order for LTCHA, 2007, s. 19 (1), with reference to non compliance under s.24.(1) during Inspection #2015\_396103\_0043 At time of this incident the order for LTCHA, s. 19 (1) remained in effect. [s. 24. (1)]



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**Issued on this 12th day of May, 2016**

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

**Original report signed by the inspector.**