



**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
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**Division de la responsabilisation et de la
performance du système de santé
Direction de l'amélioration de la
performance et de la conformité**

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Report Date(s) / Date(s) du Rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Sep 30, 2014	2014_348143_0017	O-000993- 14	Critical Incident System

Licensee/Titulaire de permis

CROWN RIDGE HEALTH CARE SERVICES INC
106 CROWN STREET, TRENTON, ON, K8V-6R3

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

WESTGATE LODGE NURSING HOME
37 WILKIE STREET, BELLEVILLE, ON, K8P-4E4

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

PAUL MILLER (143)

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): September 30th, 2014.

During the course of the inspection, the inspector(s) spoke with the Owner \Operator, the Director of Nursing, a Registered Nurse and residents.

During the course of the inspection, the inspector(s) observed resident care and services, reviewed a Critical Incident Report, internal abuse investigation reports, resident health care records inclusive of plans of care, assessments, physician orders, consults and reviewed the home's Abuse/Neglect policies and procedures.

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

Findings/Faits saillants :

1. The licensee has failed to ensure that the homes' Abuse and Neglect Zero Tolerance policy contains and explanation of the duty under section 24 of the Act to make mandatory reports.

On September 30th, 2014 Inspector #143 reviewed Crown Ridge Health Care Services Inc. Abuse/Neglect Policy Statement (Policy No. ADM. 5.0 revised March 2012) as well as Abuse/Neglect or Suspected Abuse/Neglect of a Resident (Policy No. ADM 5.2). A review of both of these policies indicated that they did not contain an explanation of the duty under Section 24 of the Act to make mandatory reports.

Westgate Lodge in addition to these policies has a Duty to Report (Policy No. ADM 5.5) which does not include an explanation of the duty under section 24 of the Long Term Care Homes Act to make mandatory reports to the Director. The home's Duty to Report policy indicates that you have a duty to report this information immediately and to report to a member of our staff. [s. 20. (2)]



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Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that a revision of the homes Abuse and Neglect Zero Tolerance policy and procedure is completed that includes within the policy an explanation of the duty to make under section 24 of the Long Term Care Homes Act mandatory Reports. The policy revision must ensure that a person, inclusive of a staff member has a duty to report to the Director irrespective of the Licensee's duty, that staff members must report any incident or suspected incident of resident abuse or neglect to the Director, that a person including a staff member must report suspicion of abuse or neglect of a resident that resulted in harm or risk of harm including the information upon which the suspicion is based where the person has reasonable grounds for the suspicion and that the duty to report to the Director is immediate. This plan should include an educational component that ensures that all staff receive training in respect of the revised Abuse and Neglect policy, to be implemented voluntarily.

Issued on this 6th day of October, 2014

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