

Health System Accountability and Performance
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Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Jun 14, 16, 2011	2011_099188_0005	Mandatory Reporting

Licensee/Titulaire de permis

WIKWEMIKONG NURSING HOME LIMITED
2281 Wikwemikong Way, P.O. Box 114, Wikwemikong, ON, P0P-2J0

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

WIKWEMIKONG NURSING HOME
2281 Wikwemikong Way, P.O. Box 114, Wikwemikong, ON, P0P-2J0

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

MELISSA CHISHOLM (188)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Mandatory Reporting inspection.

During the course of the inspection, the inspector(s) spoke with Director of Care(DOC)/Administrator, Registered Nursing Staff, Personal Support Workers (PSW) and residents.

During the course of the inspection, the inspector(s) Conducted a walk through of the home, reviewed the home's policy on prevention of abuse and neglect of residents, reviewed health care records for the resident named in the mandatory report.

The following Inspection Protocols were used in part or in whole during this inspection:

Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Definitions

WN – Written Notification
VPC – Voluntary Plan of Correction
DR – Director Referral
CO – Compliance Order
WAO – Work and Activity Order

Définitions

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 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/Faits sayants :

1. Inspector reviewed the home's policy titled "RESIDENT ABUSE" on June 14, 2011. Inspector noted that the policy does identify consequences for staff members who abuse or neglect residents, however the policy fails to set out the consequences for any other person who abuse or neglect residents (i.e. volunteers, family members, etc). The licensee failed to ensure their written policy for prevention of abuse and neglect of residents addressed the consequences for those who abuse or neglect residents.
2. Inspector reviewed the home's policy titled "RESIDENT ABUSE" on June 14, 2011. 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 has failed to ensure that the policy to promote zero tolerance of abuse and neglect of residents contains an explanation of the duty under section 24 of the Act to make mandatory reports.

**WN #2: 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/Faits sayants :



**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
prévus le Loi de 2007 les
foyers de soins de longue**

1. Inspector reviewed home's policy titled "RESIDENT ABUSE" on June 14, 2011. The inspector noted the policy does not identify that the resident and the resident's substitute decision-maker, if any, are notified of the results of the investigation required under subsection 23(1) of the Act, immediately upon the completion of the investigation. The licensee has failed to ensure the home's written policy to promote zero tolerance of abuse and neglect of residents identifies who will be informed of the investigation.

2. Inspector reviewed the home's policy titled "RESIDENT ABUSE" on June 14, 2011. Inspector noted that the home's written policy does not identify 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. The licensee has failed to ensure the home's written policy to promote zero tolerance of abuse and neglect of residents identifies the training and retraining requirements for all staff.

Issued on this 17th day of June, 2011

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