



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

**Rapport d'inspection
prévus le Loi de 2007
les foyers de soins de
longue durée**

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
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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of inspection/Genre d'inspection
January 31, 2011, April 18, 2011 & May 9, 2011	2011_116_2954_31Jan094043	Critical Incident Log# T3167

Licensee/Titulaire
Advent Healthcare Corporation
Long-Term Care Home/Foyer de soins de longue durée
Valleyview Residence, 541 Finch Avenue West, Toronto ON, M2R 3Y3
Name of Inspector/Nom de l'inspecteur
Saran Daniel-Dodd, Nursing Inspector

Inspection Summary/Sommaire d'inspection

The purpose of this inspection was to conduct a critical incident inspection regarding alleged visitor to resident abuse.

- During the course of the inspection, the inspector spoke with:
- The Administrator
 - Director of Care
 - Family & Resident Worker
 - Registered and Direct Care Staff Members
 - Resident's Substitute Decision Maker

- During the course of the inspection, the inspector:
- Reviewed health record of a resident
 - Reviewed the homes abuse policy

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

Prevention of Abuse and Neglect

Findings of Non-Compliance were found during this inspection. The following action was taken:

3 WN

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.

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 suivant constituer un avis d'écrit de l'exigence prévue le paragraphe 1 de section 152 de la Loi de 2007 les foyers de soins de longue durée.

Non-respect avec les exigences sur le *Loi de 2007 les foyers de soins de longue durée* à trouvé. (Une exigence dans la 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 #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007 s. 20 (2) (d).

At a minimum, the policy to promote zero tolerance of abuse and neglect of residents, d) shall contain an explanation of the duty under section 24 to make mandatory reports.

Findings:

Licensee policy to promote zero tolerance of abuse and neglect of residents (Policy # NM-II-R005) does not include an explanation of the duty under section 24 to make mandatory reports.

Inspector ID #: 116

WN #2: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007 s. 24 (1) 2.

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:
 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.

Findings:

- An alleged sexual abuse involving a resident was reported to staff members and was not reported to the Director as required. No action was taken by the licensee as a result of this incident.
- A further incident of alleged sexual abuse occurred involving same resident was reported to staff members. Action was taken by the home in regards to this incident.

Inspector ID #: 116

**WN #3: The Licensee has failed to comply with O.Reg. 79/10 s.96. (c), (e).
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,
(c) identifies measures and strategies to prevent abuse and neglect
(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.**

Findings:

- Policy NM-II-R005 to promote zero tolerance of abuse and neglect of residents does not stipulate measures and strategies for staff to reduce potential of abuse.
- Policy NM-II-R005 to promote zero tolerance of abuse and neglect of residents does not contain required training and retraining requirements for all staff members.
- Policy to promote zero tolerance for abuse and neglect (NM-II-R005) does not contain required 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.

Inspector ID #: 116

**Signature of Licensee or Representative of Licensee
Signature du Titulaire du représentant désigné**
**Signature of Health System Accountability and Performance Division
representative/Signature du (de la) représentant(e) de la Division de la
responsabilisation et de la performance du système de santé.**
Title:
Date:
Date of Report: (if different from date(s) of inspection).

May 9, 2011