

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

Health System Accountability and Performance Division Performance Improvement and Compliance Branch

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# Public Copy/Copie du public

| Report Date(s) /  | Inspection No /    | Log #  /    |
|-------------------|--------------------|-------------|
| Date(s) du apport | No de l'inspection | Registre no |
| Jun 16, 2015      | 2015_182128_0015   | 11106-15    |

Type of Inspection / Genre d'inspection Critical Incident System

#### Licensee/Titulaire de permis

CORPORATION OF THE COUNTY OF HURON c/o Huronlea HFA 820 Turnberry Street South BRUSSELS ON NOG 1H0

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

HURONLEA HOME FOR THE AGED 820 TURNBERRY STREET SOUTH BRUSSELS ON NOG 1H0

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

**RUTH HILDEBRAND (128)** 

### 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): June 15, 2015

This Critical Incident inspection is related to alleged abuse of a resident identified in Critical Incident # M601-000007-15.

During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, Administrative Assistant, one Registered Practical Nurse, three Personal Support Workers, one Housekeeping Aide, and one Resident.

The inspector conducted a review of the Critical Incident submitted to the Ministry, the home's internal investigation, policies and procedures related to abuse, reviewed the clinical record for one identified Resident and confirmed posting of required information.

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

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

1 WN(s) 1 VPC(s) 0 CO(s) 0 DR(s) 0 WAO(s)



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| NON-COMPLIANCE / NON - RESPECT DES EXIGENCES  |   |  |
|---|---|--|
| Legend  | Legendé   |  |
| <ul> <li>WN – Written Notification</li> <li>VPC – Voluntary Plan of Correction</li> <li>DR – Director Referral</li> <li>CO – Compliance Order</li> <li>WAO – Work and Activity Order</li> </ul>   | WN – Avis écrit<br>VPC – Plan de redressement volontaire<br>DR – Aiguillage au directeur<br>CO – Ordre de conformité<br>WAO – Ordres : travaux et activités   |  |
| Non-compliance with requirements under<br>the Long-Term Care Homes Act, 2007<br>(LTCHA) was found. (a requirement under<br>the LTCHA includes the requirements<br>contained in the items listed in the definition<br>of "requirement under this Act" in<br>subsection 2(1) of the LTCHA). | Le non-respect des exigences de la Loi de<br>2007 sur les foyers de soins de longue<br>durée (LFSLD) a été constaté. (une<br>exigence de la loi comprend les exigences<br>qui font partie des éléments énumérés dans<br>la définition de « exigence prévue par la<br>présente loi », au paragraphe 2(1) de la<br>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-<br>respect aux termes du paragraphe 1 de<br>l'article 152 de la LFSLD.  |  |



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the Long-Term Care

Homes Act, 2007

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WN #1: 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 saillants :





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1. The licensee has failed to ensure that the written policy to promote zero tolerance of abuse and neglect of residents included the following:

• procedures and interventions to assist and support residents who have been abused or neglected or allegedly abused or neglected;

•measures and strategies to prevent abuse and neglect;

•training and retraining requirements for all staff, including, 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 situations that may lead to abuse and neglect and how to avoid such situations.

A review of the home's policy entitled Prevention and Reporting of Resident Abuse/Neglect, # A09-AD-013-11, dated August 2014 revealed that it did not contain procedures and interventions to assist and support residents who have been abused or allegedly abused. The policy did not identify measures and strategies to prevent abuse and neglect. Additionally, the policy did not identify the training and retraining requirements for all staff, including, 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 situations that may lead to abuse and neglect and how to avoid such situations.

The Administrator indicated that the home is working on the abuse policies and acknowledged that the policy did not contain all the requirements in the regulations. [s. 96.]



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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 ensure that the licensee's written policy under section 20 of the Act to promote zero tolerance of abuse and neglect of residents,
•contains procedures and interventions to assist and support residents who have been abused or neglected or allegedly abused or neglected;
•identifies measures and strategies to prevent abuse and neglect;
•identifies the training and retraining requirements for all staff, including, 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 situations that may lead to abuse and neglect and how to avoid such situations, to be implemented voluntarily.

Issued on this 16th day of June, 2015

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

Original report signed by the inspector.