

Ministry of Long-Term Care

Long-Term Care Operations Division Long-Term Care Inspections Branch

Central East District

33 King Street West, 4th Floor Oshawa, ON, L1H 1A1 Telephone: (844) 231-5702

Public Report

Report Issue Date: March 6, 2025

Inspection Number: 2025-1134-0002

Inspection Type:

Complaint

Licensee: Revera Long Term Care Inc.

Long Term Care Home and City: Fosterbrooke, Newcastle

INSPECTION SUMMARY

The inspection occurred offsite on the following date(s): February 18-20, 24-28, March 3, 4, 2025 The following intake(s) were inspected:

• Intake: #00140198 - complaint regarding alleged abuse

The following **Inspection Protocols** were used during this inspection:

Prevention of Abuse and Neglect

INSPECTION RESULTS

WRITTEN NOTIFICATION: Policy to promote zero tolerance

NC # Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 25 (2) (e)

Policy to promote zero tolerance

- s. 25 (2) At a minimum, the policy to promote zero tolerance of abuse and neglect of residents.
- (e) shall contain procedures for investigating and responding to alleged, suspected



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or witnessed abuse and neglect of residents;

The licensee failed to ensure that their policy to promote zero tolerance of abuse and neglect of residents contained procedures for responding to alleged, suspected or witnessed incidents of abuse.

The home's policy to promote zero tolerance of abuse and neglect directed staff that in cases of abuse they were to ensure to preserve potential evidence. The policy did not contain procedures on when and how this was to be done.

Sources: Resident Non-Abuse Procedure, resident clinical records, home's investigation notes, interviews with RN and DOC.

COMPLIANCE ORDER CO # Duty to protect

NC # Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: FLTCA, 2021, s. 24 (1)

Duty to protect

s. 24 (1) Every licensee of a long-term care home shall protect residents from abuse by anyone and shall ensure that residents are not neglected by the licensee or staff.

The inspector is ordering the licensee to comply with a Compliance Order [FLTCA, 2021, s. 155 (1) (a)]:

The licensee shall:

- A) Revise the home's policy to promote zero tolerance of abuse and neglect of residents to include a written process that provides direction to staff in the home, on call staff, and management on how to manage incidents of alleged, witnessed, or suspected abuse. The process must include:
 - i) Direction on when and how to complete physical and emotional assessments of the residents involved. Include guidelines of specific items to look for when conducting these assessments of the resident.



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- ii) Direction on when and how to interview the resident when there is and incident of abuse.
- iii) Direction on when and how to preserve evidence.
- iv) Direction as to when the physician is to be notified and when a resident may be sent to the emergency department for further assessments.
- B) Ensure that all registered staff, including the management team and on call staff are provided education on the home's revised policy to promote zero tolerance of abuse and neglect of residents. A record of the education provided including the date, staff attending and who provided the education shall be kept available in the home.

Grounds

The licensee failed to protect a resident from abuse.

On an identified date a resident was abused.

The home's policy did not provide procedures for responding to alleged, suspected or witnessed incidents of abuse which contributed to the delay in interviewing, assessing, notifying the physician and not preserving evidence.

Sources: the home's investigation notes, resident clinical records, Resident Non-Abuse Procedure, interviews with PSW, RN, Director of Care and Police.

This order must be complied with by April 30, 2025



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REVIEW/APPEAL INFORMATION

TAKE NOTICEThe Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

Director

c/o Appeals Coordinator Long-Term Care Inspections Branch Ministry of Long-Term Care 438 University Avenue, 8th floor Toronto, ON, M7A 1N3

e-mail: MLTC.AppealsCoordinator@ontario.ca



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If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

Health Services Appeal and Review Board

Attention Registrar 151 Bloor Street West, 9th Floor Toronto, ON, M5S 1S4



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Director

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Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website www.hsarb.on.ca.