

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

Central West District
609 Kumpf Drive, Suite 105
Waterloo, ON, N2V 1K8
Telephone: (888) 432-7901

Modified Public Report (M1)

Report Issue Date: May 18, 2023

Inspection Number: 2023-1582-0003

Inspection Type:

Follow up
Critical Incident System

Licensee: Corporation of the County of Simcoe

Long Term Care Home and City: Simcoe Manor Home for the Aged, Beeton

Lead Inspector

Sharon Perry (155)

Inspector Digital Signature

Additional Inspector(s)

Dianne Tone (000686)
Kailee Bercowski (000734)

MODIFIED INSPECTION SUMMARY

This public inspection report has been revised to include the dates that the inspection took place. The inspection occurred onsite on the following date(s): May 4, 5, 9 -12, 15 and 16, 2023.

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): May 4, 5, 9 -12, 15 and 16, 2023.

The following intakes were inspected in this Critical Incident (CIS) inspection:

- Intake: #00020314 and intake #00022805 regarding allegation of staff to resident abuse.
- Intake: #00084462 regarding COVID-19 outbreak.

The following intakes were inspected in this Follow-up inspection:

- Intake: #00084699 - Follow-up to Compliance Order (CO) #001 of inspection 2023-1582-0002 with a compliance due date of April 17, 2023, related to behaviours and altercations.

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- Intake: #00084284 - Follow-up to Compliance Order (CO) #002 of inspection 2023-1582-0002 with a compliance due date of April 6, 2023, related to the infection prevention and control program.

Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #002 from Inspection #2023-1582-0002 related to O. Reg. 246/22, s. 102 (9) (b) inspected by Sharon Perry (155)

Order #001 from Inspection #2023-1582-0002 related to O. Reg. 246/22, s. 60 (a) inspected by Sharon Perry (155)

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

Infection Prevention and Control
Responsive Behaviours
Prevention of Abuse and Neglect

INSPECTION RESULTS

WRITTEN NOTIFICATION: Prevention of Abuse and Neglect

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

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

The licensee has failed to ensure a resident was protected from emotional abuse by a Personal Support Worker (PSW).

For the purpose of this Act and Regulation, “emotional abuse” means, any threatening, insulting, intimidating or humiliating gestures, actions, behaviour or remarks, including imposed social isolation, shunning, ignoring, lack of acknowledgement or infantilization that are performed by anyone other than a resident.

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Rational and Summary

A resident requested assistance and the PSW ignored the request. The resident became upset and voiced their disapproval.

During this inspection, the resident described how this incident made them feel. The resident expressed that they were concerned that the PSW could treat other residents the same way and feared that they could return to provide care for them.

The resident suffered emotional abuse by the PSW when they ignored and did not acknowledge the resident's request for assistance.

Sources: CIS report, interviews with the resident and PSWs, and review of the resident's clinical records.
[000686]