

Ministry of Health and Long-Term Care

Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

**Ministère de la Santé et des Soins de
longue durée**

Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
conformité

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Date(s) of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
November 1 – 4, 2010	2010_106_2923_01Nov144610	Complaint Inspection Log#: S-00435 IL#: IL-14594-SU
Licensee/Titulaire St. Joseph's Care Group, 35 North Algoma Street, P.O. Box 3251, Thunder Bay, ON, P7B 5G7 Fax: 807-345-4994		
Long-Term Care Home/Foyer de soins de longue durée Hogarth Riverview Manor, 300 Lillie Street, Thunder Bay, ON, P7C 4Y7 Fax : 807-623-4520		
Name of Inspector(s)/Nom de l'inspecteur(s) Margot Burns-Prouty #106		
Inspection Summary/Sommaire d'inspection		

The purpose of this inspection was to conduct two inspections concurrently, a complaint inspection and a mandatory report inspection.

During the course of the inspections, the inspector spoke with:

- the Administrator,
- the Director of Care (DOC),
- Human Resources Personnel,
- Recreation Coordinator
- Registered Practical Nurses,
- Health Care Aids (HCA),
- Dietary Aids,
- Housekeeping Staff,
- Substitute Decision Makers (SDM).

During the course of the inspections, the inspector:

- Conducted a walk-through of all resident home areas and various common areas,
- observed care provided to residents in the facility,
- audited electronic plan of care,
- audited written plan of care,
- reviewed the following:
 - Abuse policies
 - Complaint policies

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

- Personal Support Services
- Responsive Behaviours
- Prevention of Abuse and Neglect

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

1 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

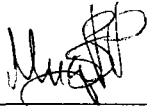
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.

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'exigences prévue le paragraphe 1 de section 152 de 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 le 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, C8, s. 19(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.	
Findings: 1. A resident was pulled from a seated position by a co-resident. A HCA attempted to soften the fall by attempting to lower the resident to the floor. As a result of the fall the resident sustained a laceration and received sutures to her wound. The licensee failed to protect this resident from abuse from their fellow resident.	
Inspector ID #:	106

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 of Report (if different from date(s) of inspection). January 26, 2011