



**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
prévus le Loi de 2007 les
foyers de soins de longue**

Health System Accountability and Performance
Division
Performance Improvement and Compliance Branch
Division de la responsabilisation et de la
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Public Copy/Copie du public

Date(s) of inspection/Date(s) de l'inspection	Inspection No/ No de l'inspection	Type of Inspection/Genre d'inspection
Oct 19, 20, 21, 28, Nov 29, Dec 1, 2011	2011_055154_0003	Mandatory Reporting

Licensee/Titulaire de permis

ST. JOSEPH'S HEALTH CENTRE OF SUDBURY
1140 South Bay Road, SUDBURY, ON, P3E-0B6

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

ST. GABRIEL'S VILLA OF SUDBURY
4690 Municipal Road 15, , Chelmsford, ON, P0M-1L0

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

GAIL PEPLINSKIE (154)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Mandatory Reporting inspection.

During the course of the inspection, the inspector(s) spoke with the Site Manager, VP Clinical Services, Director of Care (DOC), Registered staff (RN/RPN), Personal Support Workers (PSW) and residents.

During the course of the inspection, the inspector(s) conducted a walk throughout 2 resident care areas and various common areas, observed interactions between residents and staff, reviewed electronic and written plan of care, reviewed the health care record of the resident identified in the mandatory report, reviewed the home's Abuse policy issued September 13, 2010 and last reviewed October 4, 2011.

The following Inspection Protocols were used during this inspection:

Prevention of Abuse, Neglect and Retaliation

Findings of Non-Compliance were found during this inspection.

NON-COMPLIANCE / NON-RESPECT DES EXIGENCES

Legend	Legende
WN – Written Notification	WN – Avis écrit
VPC – Voluntary Plan of Correction	VPC – Plan de redressement volontaire
DR – Director Referral	DR – Aiguillage au directeur
CO – Compliance Order	CO – Ordre de conformité
WAO – Work and Activity Order	WAO – Ordres : travaux et activités
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 non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (Une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la 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-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 20. Policy to promote zero tolerance

Specifically failed to comply with the following subsections:

s. 20. (1) Without in any way restricting the generality of the duty provided for in section 19, every licensee shall ensure that there is in place a written policy to promote zero tolerance of abuse and neglect of residents, and shall ensure that the policy is complied with. 2007, c. 8, s. 20 (1).

s. 20. (2) At a minimum, the policy to promote zero tolerance of abuse and neglect of residents,

- (a) shall provide that abuse and neglect are not to be tolerated;**
- (b) shall clearly set out what constitutes abuse and neglect;**
- (c) shall provide for a program, that complies with the regulations, for preventing abuse and neglect;**
- (d) shall contain an explanation of the duty under section 24 to make mandatory reports;**
- (e) shall contain procedures for investigating and responding to alleged, suspected or witnessed abuse and neglect of residents;**
- (f) shall set out the consequences for those who abuse or neglect residents;**
- (g) shall comply with any requirements respecting the matters provided for in clauses (a) through (f) that are provided for in the regulations; and**
- (h) shall deal with any additional matters as may be provided for in the regulations. 2007, c. 8, s. 20 (2).**

Findings/Faits saillants :

1. The home's Abuse Policy does not identify the training and retraining requirements for all staff including situations that may lead to abuse and neglect and how to avoid such situations.[LTCHA 2007, S.O.2007, c.8, s.20.(2)]
2. The Abuse Policy does not "contain an explanation of the duty under section 24 to make mandatory reports". Inspector discussed the Policy titled "Resident Abuse" with the DOC, on October 21 and 28, 2011. The DOC verified that the policy requires updating to meet the requirements of the legislation.[LTCHA 2007,S.O.2007, c.8, s.20.2 (d)]
3. The inspector reviewed Mandatory Reports for the incident of abuse toward a resident. The report identifies that a PSW, was witnessed by another PSW, placing a "rolled up pericloth in the mouth of the resident". There was a nine (9) day lag from the time of the witnessed incident of abuse until it was reported to management by the witness. Inspector interviewed the DOC, on October 21 and 28, 2011 related to the incident of abuse. The DOC verified that the PSW who witnessed the abuse, did not report the incident until 9 days later. Inspector reviewed the Policy titled "Resident Abuse" which identifies that "any employee who witnesses or becomes aware of or suspects resident abuse shall report it immediately to the Registered Staff/Director of Care/Administrator who will conduct a thorough and confidential investigation".[LTCHA 2007,S.O.2007, c.8, s.20.(1)]



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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 to ensure that the written policy to promote zero tolerance of abuse meets all requirements under the LTCHA 2007, S.O.2007, c.8 s.20 and that the policy is complied with, to be implemented voluntarily.

Issued on this ^{20th} 1st day of ^{January} ~~December~~, 2011 ²⁰¹²

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

A handwritten signature in cursive script, appearing to read "G. Plunkie", is written within a large rectangular box.