

Inspection Report under  
the Long-Term Care  
Homes Act, 2007

Rapport d'inspection prévue  
sous *la Loi de 2007 sur les foyers  
de soins de longue durée*

Long-Term Care Homes Division  
Long-Term Care Inspections Branch

Division des foyers de soins de  
longue durée  
Inspection de soins de longue durée

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| <b>Report Date(s) /<br/>Date(s) du Rapport</b> | <b>Inspection No /<br/>No de l'inspection</b> | <b>Log # /<br/>No de registre</b> | <b>Type of Inspection /<br/>Genre d'inspection</b> |
|--|---|-----------------------------------|--|
| Dec 10, 2019                                   | 2019_773155_0019                              | 020396-19, 020634-19              | Critical Incident<br>System                        |

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**Licensee/Titulaire de permis**

488491 Ontario Inc.  
c/o Jarlette Health Services 711 Yonge Street MIDLAND ON L4R 2E1

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

Avalon Retirement Centre  
355 Broadway Avenue ORANGEVILLE ON L9W 3Y3

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

SHARON PERRY (155)

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**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): November 25, 26 and 27, 2019.**

**Katy Harrison #766 was also present during this inspection.**

**The following intakes were completed during this inspection:**

**Log 020396-19 related to an unexpected death and**

**Log 020634-19 related to alleged resident to resident abuse.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, Director of Care, Registered Nurse, Registered Practical Nurses, Personal Support Workers and residents.**

**The inspectors also toured resident living areas; observed resident-staff and resident-resident interactions; reviewed relevant clinical records and schedules.**

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

**Falls Prevention**

**Responsive Behaviours**

**During the course of this inspection, Non-Compliances were not issued.**

**0 WN(s)**

**0 VPC(s)**

**0 CO(s)**

**0 DR(s)**

**0 WAO(s)**

**NON-COMPLIANCE / NON - RESPECT DES EXIGENCES**

|   |  |
|---|--|
| <p>Legend</p> <p>WN – Written Notification<br/> VPC – Voluntary Plan of Correction<br/> DR – Director Referral<br/> CO – Compliance Order<br/> WAO – Work and Activity Order</p>  | <p>Légende</p> <p>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</p>  |
| <p>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).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p> | <p>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.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p> |

**Issued on this 10th day of December, 2019**

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

**Original report signed by the inspector.**