



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

**Rapport d'inspection
prévue le *Loi de 2007
les foyers de soins de
longue durée***

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

London Service Area Office
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**Ministère de la Santé et des Soins de
longue durée**

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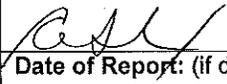
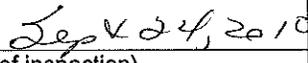
Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
conformité

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Dates of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
Sept. 17 & 20 , 2010	2010_112_2626_17Sep084316	Follow up to Annual Review & Complaint investigation
Licensee/Titulaire Babcock Community Care Centre Inc., 196 Wellington Street, PO Box 190, Wardsville, ON NOL 2N0		
Long-Term Care Home/Foyer de soins de longue durée Babcock Community Care Centre 196 Wellington Street, Wardsville, ON NOL 2N0		
Name of Inspector/Nom de l'inspecteur Carole Alexander Inspector #112		
Inspection Summary/Sommaire d'inspection		
<p>The purpose of this inspection was to conduct a follow up inspection to the last annual review conducted in April of 2010 and to complaint investigation (L10997) April 2010.</p> <p>During the course of the inspection, the inspector spoke with: Residents, family members, the Administrator, Director of Care, Registered staff, PSW staff, residents, and family members.</p> <p>During the course of the inspection, the inspector: Reviewed care provisions related to assessment and management of the following: restraints, wound care, pain, and process for referrals. Physician medication orders and applicable medication administration record were reviewed. Resident care plans and the home's The home's critical incident reporting process was reviewed as well their policy for abuse definitions and reporting.</p> <p>The following Inspection Protocols were used in part or in whole during this inspection:</p> <ul style="list-style-type: none"> • Critical Incident Response • Fall Prevention • Minimizing of Restraining • Skin and Wound • Pain <p><input checked="" type="checkbox"/> There are no findings of Non-Compliance as a result of this inspection.</p>		



CORRECTED NON-COMPLIANCE Non-respectés à Corrigé				
REQUIREMENT EXIGENCE	TYPE OF ACTION/ORDER	ACTION/ ORDER #	INSPECTION REPORT #	INSPECTOR ID #
Long Term Care Program Manual	Unmet criteria	A1.11	2010_112_2626_17Sep084316	112
Long Term Care Program Manual	Unmet criteria	A1.12	2010_112_2626_17Sep084316	112
Long Term Care Program Manual	Unmet criteria	A1.17	2010_112_2626_17Sep084316	112
Long Term Care Program Manual	Unmet criteria	B1.6	2010_112_2626_17Sep084316	112
Long Term Care Program Manual	Unmet criteria	B1.17	2010_112_2626_17Sep084316	112
Long Term Care Program Manual	Unmet criteria	B2.4	2010_112_2626_17Sep084316	112
Long Term Care Program Manual	Unmet criteria	C1.17	2010_112_2626_17Sep084316	112
Long Term Care Program Manual	Unmet criteria	M3.7	2010_112_2626_17Sep084316	112

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:	  Date of Report: (if different from date(s) of inspection).	