



**Ministry of Health and  
Long-Term Care**

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

**Health System Accountability and  
Performance Division  
Performance Improvement and  
Compliance Branch**

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

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

Bureau régional de services de  
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LONDON ON N6A 5R2  
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**Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du apport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Nov 9, 2015	2015_277538_0031	025756-15	Complaint

**Licensee/Titulaire de permis**

CARESSANT-CARE NURSING AND RETIREMENT HOMES LIMITED  
264 NORWICH AVENUE WOODSTOCK ON N4S 3V9

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

CARESSANT CARE WOODSTOCK NURSING HOME  
81 FYFE AVENUE WOODSTOCK ON N4S 8Y2

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

NANCY JOHNSON (538)

**Inspection Summary/Résumé de l'inspection**



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**The purpose of this inspection was to conduct a Complaint inspection.**

**This inspection was conducted on the following date(s): October 27, 2015.**

**This inspection is being conducted as a result of a complaint submitted to the  
Ministry of Health and Long Term Care related to documentation of complaints.**

**During the course of the inspection, the inspector(s) spoke with the Administrator,  
a Registered staff member and a family member.**

**The Inspector observed staff/resident interactions, reviewed the clinical record,  
and other documents pertaining to the inspection.**

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

**Accommodation Services - Laundry**

**Reporting and Complaints**

**During the course of this inspection, Non-Compliances were issued.**

**1 WN(s)  
0 VPC(s)  
0 CO(s)  
0 DR(s)  
0 WAO(s)**



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

**Legend**

WN – Written Notification  
VPC – Voluntary Plan of Correction  
DR – Director Referral  
CO – Compliance Order  
WAO – Work and Activity Order

**Legendé**

WN – Avis écrit  
VPC – Plan de redressement volontaire  
DR – Aiguillage au directeur  
CO – Ordre de conformité  
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 O.Reg 79/10, s. 101. Dealing with complaints**



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**Specifically failed to comply with the following:**

- s. 101. (2) The licensee shall ensure that a documented record is kept in the home that includes,**
- (a) the nature of each verbal or written complaint; O. Reg. 79/10, s. 101 (2).**
  - (b) the date the complaint was received; O. Reg. 79/10, s. 101 (2).**
  - (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required; O. Reg. 79/10, s. 101 (2).**
  - (d) the final resolution, if any; O. Reg. 79/10, s. 101 (2).**
  - (e) every date on which any response was provided to the complainant and a description of the response; and O. Reg. 79/10, s. 101 (2).**
  - (f) any response made in turn by the complainant. O. Reg. 79/10, s. 101 (2).**

**Findings/Faits saillants :**

1. The licensee has failed to ensure that there was a documented record kept in the home that included, (a) the nature of each verbal or written complaint; (b) the date the complaint was received; (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required; (d) the final resolution, if any; (e) every date on which any response was provided to the complainant and a description of the response; and (f) any response made in turn by the complainant. O. Reg. 79/10, s. 101 (2).

Interview on October 27, 2015, with an identified family member revealed a complaint regarding a care issue was reported to the Administrator.

Record review on October 27, 2015, of the home's concerns and complaints binder revealed there was no documented evidence of the complaint.

Interview on October 27, 2015, with the Administrator confirmed that the concern/complaint binder did not contain information in accordance with the legislation and confirmed the expectation that the documented record in the home should include all of the required information. [s. 101. (2)]



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**Issued on this 9th day of November, 2015**

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

**Original report signed by the inspector.**