

Ministry of Long-Term Care

Ministère des Soins de longue durée

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

Rapport d'inspection en vertu de la Loi de 2007 sur les foyers de soins de longue durée

**Long-Term Care Operations Division Long-Term Care Inspections Branch** 

Division des opérations relatives aux soins de longue durée Inspection de soins de longue durée London Service Area Office 130 Dufferin Avenue 4th floor LONDON ON N6A 5R2 Telephone: (519) 873-1200 Facsimile: (519) 873-1300 Bureau régional de services de London 130, avenue Dufferin 4ème étage LONDON ON N6A 5R2 Téléphone: (519) 873-1200 Télécopieur: (519) 873-1300

## Amended Public Copy/Copie modifiée du rapport public

Report Date(s)/ Inspection No/ Date(s) du No de l'inspection No de registre

May 13, 2022 2022\_1034\_0001 (A1) 020641-21 Critical Incident System 020620-21

### Licensee/Titulaire de permis

Copper Terrace Limited 284 Central Avenue, London, ON, N6B 2C8

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

Copper Terrace

91 Tecumseh Road, Chatham, ON, N7M 1B3

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

Amended by CHERYL MCFADDEN (745) - (A1)

# Amended Inspection Summary/Résumé de l'inspection modifié



Ministry of Long-Term Care

Ministère des Soins de longue durée

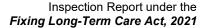
Inspection Report under the Long-Term Care Homes Act, 2007 Rapport d'inspection en vertu de la Loi de 2007 sur les foyers de soins de longue durée

This licensee inspection report has been revised to reflect the correct inspection number and report issue date. The Critical Incident System inspection #2022\_1034\_0001 was completed on May 3, 2022.

Issued on this 13th day of May 2022 (A1)

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

Original report signed by the inspector.





**Ministry of Long-Term Care** Long-Term Care Operations Division Long-Term Care Inspections Branch London Service Area Office 130 Dufferin Ave, 4<sup>th</sup> Floor London ON N6A 5R2 Telephone: 1-800-663-3775 LondonSAO.moh@ontario.ca

#### **Amended Public Report (A1)**

| Report Issue Date   | May 13, 2022    |               |                            |
|---|-----------------|---------------|----------------------------|
| Inspection Number   | 2022_1034_0001  |               |                            |
| Inspection Type   |                 |               |                            |
| □ Critical Incident System     □ Critical Incident Sy | em 🗆 Complaint  | □ Follow-Up   | ☐ Director Order Follow-up |
| ☐ Proactive Inspection  | ☐ SAO Initiated |               | ☐ Post-occupancy           |
| □ Other   |                 |               | _                          |
| Licensee<br>Copper Terrace Limited  | I               |               |                            |
| Long-Term Care Home and City Copper Terrace Nursing Home, Chatham   |                 |               |                            |
| Inspector who Amended<br>Cheryl McFadden #745   |                 | Inspector who | Amended Digital Signature  |
|   |                 |               |                            |

#### AMENDED INSPECTION REPORT SUMMARY

This licensee inspection report has been revised to reflect the correct inspection number and report issue date. The Critical Incident System inspection #2022\_1034\_0001 was completed on May 3, 2022.

#### **INSPECTION SUMMARY**

The inspection occurred on the following date(s): April 25, 26 and 27, 2022.

The following intake(s) were inspected:

- Log# 020641-21, CIS #1115-000052-21 related to responsive behaviours and resident to resident abuse.
- Log# 020620-21, CIS #1115-000053-21 related to responsive behaviours and resident to resident abuse.

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

- Infection Prevention and Control (IPAC)
- Prevention of Abuse and Neglect
- Responsive Behaviours

#### **INSPECTION RESULTS**



Inspection Report under the Fixing Long-Term Care Act, 2021

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During the course of this inspection, the inspector(s) made relevant observations, reviewed records and conducted interviews, as applicable. There were *no findings of non-compliance*.