

Ministry of Long-Term Care

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

London District

130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

Public Report

Report Issue Date: January 30, 2025

Inspection Number: 2025-1539-0001

Inspection Type:

Critical Incident

Licensee: The Corporation of the City of London

Long Term Care Home and City: Dearness Home for Senior Citizens, London

INSPECTION SUMMARY

The inspection occurred onsite on the following dates: January 27 to 30, 2025

The following intakes were inspected:

- Intake #00134639/Critical Incident Report System (CIS) #514-000017-24 regarding allegations of improper care of a resident
- Intake #00136318/CIS #514-000001-25 regarding infection prevention and control

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

Skin and Wound Prevention and Management
Infection Prevention and Control
Prevention of Abuse and Neglect
Pain Management

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INSPECTION RESULTS

WRITTEN NOTIFICATION: Skin and Wound Care

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 34 (2)

General requirements

s. 34 (2) The licensee shall ensure that any actions taken with respect to a resident under a program, including assessments, reassessments, interventions and the resident's responses to interventions are documented.

The licensee has failed to ensure that a resident had a weekly skin assessment documented when an area of altered skin integrity was identified.

Electronic documentation for a resident did not demonstrate that an assessment was documented over a period of 18 days in January 2025. Staff #102 recounted in an interview that the resident was assessed as directed, but the assessments were not documented in the resident's electronic medical record. Furthermore, the home's policy, Skin Care Program Overview, directs staff to complete and document weekly skin assessments until impaired skin has healed or closed.

Sources: record review of electronic medical record for resident and LTCH policy Skin Care Program Overview; interview with staff #102

WRITTEN NOTIFICATION: Infection Prevention and Control

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 102 (9) (a)

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Infection prevention and control program

s. 102 (9) The licensee shall ensure that on every shift,

(a) symptoms indicating the presence of infection in residents are monitored in accordance with any standard or protocol issued by the Director under subsection (2)

The licensee has failed to ensure that several residents had symptoms of infection monitored every shift over a period of three weeks in December, 2024 and January, 2025. Staff #103 recounted in an interview that staff are expected to monitor residents on every shift. The home's policy, Infection Surveillance and Control, directs staff to monitor resident for signs and symptoms of infection on a daily basis and to document daily on symptoms.

Sources: review of LTCH policy Infection Surveillance and Control and electronic medical record for several residents; interview with staff #103