

**Ministry of Long-Term Care**

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

**Central West District**

609 Kumpf Drive, Suite 105  
Waterloo, ON, N2V 1K8  
Telephone: (888) 432-7901

<b>Public Report</b>	
<b>Report Issue Date:</b>	January 16, 2025
<b>Inspection Number:</b>	2025-1081-0001
<b>Inspection Type:</b>	Complaint Follow up
<b>Licensee:</b>	CVH (No. 8) LP by its general partner, Southbridge Care Homes (a limited partnership, by its general partner, Southbridge Health Care GP Inc.)
<b>Long Term Care Home and City:</b>	Errinrung Long Term Care Home, Thornbury

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): January 6-9, 14-16, 2025

The following intake(s) were inspected:

- Intake: #00124743 - Follow-up #: 1 - O. Reg. 246/22 - s. 12 (1) 1. iii.
- Intake: #00124744 - Follow-up #: 1 - O. Reg. 246/22 - s. 12 (1) 1. iii. B.
- Intake: #00130132 - Complaint related to neglect
- Intake: #00133944 - Complaint related to multiple care concerns

### Previously Issued Compliance Order(s)

The following previously issued Compliance Order(s) were found to be in compliance:

Order #001 from Inspection #2024-1081-0003 related to O. Reg. 246/22, s. 12 (1) 1. iii.

Order #002 from Inspection #2024-1081-0003 related to O. Reg. 246/22, s. 12 (1) 1. iii. B.

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

Resident Care and Support Services  
Skin and Wound Prevention and Management  
Safe and Secure Home  
Infection Prevention and Control

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Skin and Wound Prevention and Management

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

**Non-compliance with: O. Reg. 246/22, s. 55 (2) (b) (iv)**

Skin and wound care

s. 55 (2) Every licensee of a long-term care home shall ensure that,

(b) a resident exhibiting altered skin integrity, including skin breakdown, pressure injuries, skin tears or wounds,

(iv) is reassessed at least weekly by an authorized person described in subsection (2.1), if clinically indicated;

The licensee has failed to ensure that a resident received a weekly wound assessment by a member of the registered nursing staff, using a clinically appropriate assessment instrument that was specifically designed for skin and wound assessment.

The home failed to ensure that a resident had weekly skin assessments completed on five occasions during a three-month period.

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Sources: Residents electronic record including progress notes, wound assessments, care plan, and treatment administration record (TAR), Wound Management policy #RFC-06-02, interviews with Registered Practical Nurse (RPN), and Registered Nurse (RN) Wound Care Champion.