



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

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

**Long-Term Care Homes Division  
Long-Term Care Inspections Branch**  
**Division des foyers de soins de  
longue durée**  
**Inspection de soins de longue durée**

Ottawa Service Area Office  
347 Preston St Suite 420  
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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 d'Ottawa  
347 rue Preston bureau 420  
OTTAWA ON K1S 3J4  
Téléphone: (613) 569-5602  
Télécopieur: (613) 569-9670

**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>
Apr 7, 2017	2017_444602_0008	034599-16, 000339-17, Critical Incident 002193-17, 003831-17, System 005544-17	

**Licensee/Titulaire de permis**

GIBSON HOLDINGS (ONTARIO) LTD  
343 Amherst Drive Amherstview ON K7N 1X3

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

HELEN HENDERSON NURSING HOME  
343 Amherst Drive Amherstview ON K7N 1X3

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

WENDY BROWN (602)

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



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**The purpose of this inspection was to conduct a Critical Incident System inspection.**

**This inspection was conducted on the following date(s): March 8, 9, 10 and 14-17, 2017**

**Five Critical Incident Inspections were inspected as follows:**

**Log# 034599-16 related to alleged staff to resident abuse.**

**Log# 000339-17 related to a fall with injury requiring transfer to hospital.**

**Log# 002193-17 related to alleged staff to resident neglect.**

**Log# 003831-17 related to a fall with injury requiring transfer to hospital.**

**Log# 005544-17 related to a fall with injury requiring transfer to hospital.**

**During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care (DOC), the Assistant Director of Care (ADOC), Registered Nurses (RN), Registered Practical Nurses (RPN), Personal Support Workers (PSW), Activity Staff, family members and residents. As part of the inspection, electronic records & hard copy charts were reviewed, observations of care& service delivery were made and staff interviews were completed. Additionally, the Home's investigation documentation and relevant policies and procedures were considered.**

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

**Falls Prevention**

**Prevention of Abuse, Neglect and Retaliation**

**During the course of this inspection, Non-Compliances were not issued.**

**0 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.

**Issued on this 7th day of April, 2017**

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

**Original report signed by the inspector.**