

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

North District  
159 Cedar St, Suite 403  
Sudbury, ON, P3E 6A5  
Telephone: (800) 663-6965

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## Original Public Report

<b>Report Issue Date:</b> August 22, 2023	
<b>Inspection Number:</b> 2023-1360-0002	
<b>Inspection Type:</b> Critical Incident	
<b>Licensee:</b> Lady Dunn Health Centre	
<b>Long Term Care Home and City:</b> Lady Dunn Health Centre (Wawa), Wawa	
<b>Lead Inspector</b> Shelley Murphy (684)	<b>Inspector Digital Signature</b>

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): August 15-17, 2023

The following intake was inspected:

- One intake related to a resident fall.

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

Infection Prevention and Control  
Falls Prevention and Management

## INSPECTION RESULTS

### Non-Compliance Remedied

**Non-compliance** was found during this inspection and was **remedied** by the licensee prior to the conclusion of the inspection. The inspector was satisfied that the non-compliance met the intent of section 154 (2) and requires no further action.

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**NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)**  
FLTCA, 2021, s. 6 (10) (b)

The licensee failed to ensure that a resident was reassessed and the plan of care reviewed and revised at least every six months and at any other time when, resident care needs changed or care set out in the plan were no longer necessary.

**Rationale and Summary**

A resident was observed with a specific fall prevention intervention in place. A staff member confirmed that staff were to utilize this intervention and it should be noted in the resident's care plan.

The care plan for the resident related to falls prevention did not indicate that the specified intervention was to be utilized. A second staff member, stated that the intervention should have been in the care plan for the resident.

This was low risk for the resident as the staff were still utilizing the intervention.

Prior to the end of the inspection, a staff member informed Inspector #684 that the resident's care plan had been updated to reflect the intervention.

**Sources:** Resident's chart, care plan, observations of the resident; and, staff interviews.  
[684]

Date Remedy Implemented: August 15, 2023