

# Inspection Report Under the Fixing Long-Term Care Act, 2021

### **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: May 26, 2025

**Inspection Number**: 2025-1520-0003

**Inspection Type:**Critical Incident

**Licensee:** St. Joseph's Health Care, London

**Long Term Care Home and City:** Mount Hope Centre for Long Term Care, London

### **INSPECTION SUMMARY**

The inspection occurred onsite on the following dates: May 20, 22, 23 and 26, 2025.

The inspection occurred offsite on the following date: May 21, 2025.

The following intake(s) were inspected:

- Intake #00144251/ Critical Incident Report System (CIS) #C596-000066-25 related to infection prevention and control
- Intake #00144889/ CIS #C596-000068-25 related to falls prevention and management
- Intake #00147118/ CIS #C596-000076-25 related to infection prevention and control

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

Infection Prevention and Control Safe and Secure Home Falls Prevention and Management



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## **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.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: FLTCA, 2021, s. 6 (1) (c)

Plan of care

s. 6 (1) Every licensee of a long-term care home shall ensure that there is a written plan of care for each resident that sets out,

(c) clear directions to staff and others who provide direct care to the resident; and

The licensee failed to ensure that the plan of care a resident provided clear direction to staff with regards to transferring the resident. The resident's written care plan documented that the resident required a specific level of care for transfers, however point of care signage in the resident's room indicated a different level of care. The signage was updated to accurately reflect the resident's needs related to transferring on May 22, 2025.

**Sources:** Observation of a resident's room in May, 2025, Assessment, Care Plan, and an interview with staff #102.

Date Remedy Implemented: May 22, 2025