



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

**Ministère de la Santé et des  
Soins de longue durée**

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

**Rapport d'inspection sous la  
Loi de 2007 sur les foyers de  
soins de longue durée**

**Health System Accountability and  
Performance Division  
Performance Improvement and  
Compliance Branch**

**Division de la responsabilisation et de la  
performance du système de santé  
Direction de l'amélioration de la  
performance et de la conformité**

London Service Area Office  
130 Dufferin Avenue, 4th floor  
LONDON, ON, N6A-5R2  
Telephone: (519) 873-1200  
Facsimile: (519) 873-1300

Bureau régional de services de  
London  
130, avenue Dufferin, 4ème étage  
LONDON, ON, N6A-5R2  
Téléphone: (519) 873-1200  
Télécopieur: (519) 873-1300

## **Public Copy/Copie du public**

<b>Report Date(s) / Date(s) du Rapport</b>	<b>Inspection No / No de l'inspection</b>	<b>Log # / Registre no</b>	<b>Type of Inspection / Genre d'inspection</b>
Jun 27, 2014	2014_232112_0004	L-000611-14	Complaint

### **Licensee/Titulaire de permis**

GROSVENOR HEALTH CARE PARTNERSHIP (NO. 3)  
150 WATER STREET SOUTH, CAMBRIDGE, ON, N1R-3E2

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

PARKVIEW MANOR HEALTH CARE CENTRE  
98-3RD STREET SOUTH EAST, P.O. BOX 298, CHESLEY, ON, N0G-1L0

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

CAROLE ALEXANDER (112)

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

**The purpose of this inspection was to conduct a Complaint inspection.**

**This inspection was conducted on the following date(s): June 26, 2014**

**During the course of the inspection, the inspector(s) spoke with the Director of Care, the Resident and Substitute Decision Maker**

**During the course of the inspection, the inspector(s) reviewed the related critical incident, home's related internal investigation and the clinical record including all related assessments.**

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

**There are no findings of Non-Compliance as a result of this inspection.**



**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.)

The following constitutes written notification of non-compliance under paragraph 1 of section 152 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.

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 27th day of June, 2014

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