Ontario

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
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Public Report

Report Issue Date: March 3, 2025
Inspection Number: 2025-1124-0001
Inspection Type: Proactive Compliance Inspection
Licensee: peopleCare Communities Inc.
Long Term Care Home and City: peopleCare Tavistock, Tavistock

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): February 20, 21, 24, 25, 26, 27, 2025 and March 3, 2025

The following intake(s) were inspected:

- Intake: #00139542 - Proactive Compliance Inspection -2025

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

Skin and Wound Prevention and Management
Resident Care and Support Services
Food, Nutrition and Hydration
Residents' and Family Councils
Medication Management
Infection Prevention and Control
Safe and Secure Home
Prevention of Abuse and Neglect
Quality Improvement
Staffing, Training and Care Standards
Residents' Rights and Choices
Pain 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.

NC #001 remedied pursuant to FLTCA, 2021, s. 154 (2)
Non-compliance with: FLTCA, 2021, s. 6 (10) (b)
Plan of care
s. 6 (10) The licensee shall ensure that the resident is reassessed and the plan of care reviewed and revised at least every six months and at any other time when,
(b) the resident's care needs change or care set out in the plan is no longer necessary

The licensee failed to ensure that a resident's nutritional plan of care was updated when the resident's diet care needs changed following a nutritional assessment.

During a dining observation the inspector observed that the resident was served a different diet than what was outlined in their care plan. A Dietary staff member indicated that the resident's diet had changed but was uncertain why this change was not documented in the resident's clinical records.

A nutritional assessment record that was competed for the resident had reflected the change and aligned with the diet the resident was served during the dining observation. The resident's care plan was subsequently revised during the inspection.

Sources: Observation, resident clinical records, and staff interviews.

Date Remedy Implemented: February 25, 2025