

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

Ottawa District  
347 Preston Street, Suite 410  
Ottawa, ON, K1S 3J4  
Telephone: (877) 779-5559

## Original Public Report

Report Issue Date: June 14, 2024	
Inspection Number: 2024-1519-0004	
Inspection Type: Critical Incident	
Licensee: The Perley and Rideau Veterans' Health Centre	
Long Term Care Home and City: The Perley and Rideau Veterans' Health Centre, Ottawa	
Lead Inspector Maryse Lapensee (000727)	Inspector Digital Signature
Additional Inspector(s) Gurpreet Gill (705004) Pamela Finnikin (720492) Severn Brown (740785)	

## INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): June 5, 6, 7, 10, 13, 14, 2024

The following intake(s) were inspected:

- Intake: #00112199/CI #3025-000038-24; Intake: #00114440/CI #3025-000047-24 and Intake: #00116596/CI #3025-000058-24 - related to a fall resulting in injury.
- Intake: #00112549/CI #3025-000043-24 and Intake: #00116414/CI #3025-000057-24 - related to improper/incompetent treatment of a resident.

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- Intake: #00114775/CI #3025-000048-24 and Intake: #00117134/CI #3025-000061-24 - related to allegations of physical abuse to a resident by resident.
- Intake: #00116871/CI #3025-000060-24 - related to allegation of financial abuse of resident by staff member.

The following intakes were completed in this inspection:

- Intake: #00114956/CI #3025-000051-24 - related to a fall resulting in injury.

The following Inspection Protocols were used during this inspection:

Contenance Care  
Resident Care and Support Services  
Skin and Wound Prevention and Management  
Infection Prevention and Control  
Prevention of Abuse and Neglect  
Responsive Behaviours  
Falls Prevention and Management

## INSPECTION RESULTS

### WRITTEN NOTIFICATION: Reporting certain matters to Director

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: FLTCA, 2021, s. 28 (1) 2.

Reporting certain matters to Director

s. 28 (1) A person who has reasonable grounds to suspect that any of the following

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has occurred or may occur shall immediately report the suspicion and the information upon which it is based to the Director:

2. Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident.

The licensee has failed to immediately report the suspicion and the information upon which it is based to the Director regarding an allegation of financial abuse by a PSW toward a resident.

Sources: CI #3025-000060-24; Home's investigation notes, interview with a Resident Care Manager. [000727]

## WRITTEN NOTIFICATION: Skin and wound care

NC #002 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 55 (2) (a) (ii)

Skin and wound care

s. 55 (2) Every licensee of a long-term care home shall ensure that,

(a) a resident at risk of altered skin integrity receives a skin assessment by a member of the registered nursing staff,

(ii) upon any return of the resident from hospital, and

The licensee has failed to ensure that a resident, who is at risk of altered skin integrity, had a full skin assessment performed after returning from hospital.

Sources: Review of the resident's chart; Interview with a Resident Care Manager. [740785]

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## WRITTEN NOTIFICATION: Continence care and bowel management

NC #003 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 56 (2) (c)

Continence care and bowel management

s. 56 (2) Every licensee of a long-term care home shall ensure that,

(c) each resident who is unable to toilet independently some or all of the time receives assistance from staff to manage and maintain continence;

The licensee has failed to ensure that a resident, who is unable to toilet independently, received assistance from the staff with incontinence care.

Sources: CI #3025-000043-24, the resident's clinical records, the home's investigative notes, and interviews with a PSW supervisor and Manager of Resident Care. [705004]

## WRITTEN NOTIFICATION: Reports re critical incidents

NC #004 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 115 (4) (b)

Reports re critical incidents

s. 115 (4) Where an incident occurs that causes an injury to a resident for which the resident is taken to a hospital, but the licensee is unable to determine within one business day whether the injury has resulted in a significant change in the resident's health condition, the licensee shall,

(b) where the licensee determines that the injury has resulted in a significant

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change in the resident's health condition or remains unable to determine whether the injury has resulted in a significant change in the resident's health condition, inform the Director of the incident no later than three business days after the occurrence of the incident, and follow with the report required under subsection (5). O. Reg. 246/22, s. 115 (4).

The licensee has failed to inform the Director of an injury that resulted in hospitalization and a significant change in status for a resident.

Sources: CI #3025-000058-24, a resident's clinical records and interview with a Resident Care Manager. [720492]