

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

Amended Public Report Cover Sheet (A1)

Amended Report Issue Date: November 24, 2025
Original Report Issue Date: November 14, 2025
Inspection Number: 2025-1519-0011 (A1)
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

AMENDED INSPECTION SUMMARY

This report has been amended to:
Correct legislative reference for non-compliance #002 for housekeeping and cleaning of contact surfaces.

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Long Term Care Home and City: The Perley and Rideau Veterans' Health Centre,
Ottawa

AMENDED INSPECTION SUMMARY

This report has been amended to:

Correct legislative reference for non-compliance #002 for housekeeping and cleaning of contact surfaces.

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): November 12-14, 2025

The following intake(s) were inspected:

- Intake: #00153805 - AH-2025-0000654/3025-000076-25 - COVID - Outbreak (resolved)
- Intake: #00161768 - 3025-000113-25 - Fall of resident resulting in injury with a change in condition.

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

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Infection Prevention and Control
Falls Prevention and Management

AMENDED INSPECTION RESULTS

WRITTEN NOTIFICATION: Falls prevention and management

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

Non-compliance with: O. Reg. 246/22, s. 54 (1)

Falls prevention and management

s. 54 (1) The falls prevention and management program must, at a minimum, provide for strategies to reduce or mitigate falls, including the monitoring of residents, the review of residents' drug regimes, the implementation of restorative care approaches and the use of equipment, supplies, devices and assistive aids. O. Reg. 246/22, s. 54 (1).

A resident did not have their neurological status assessed, after sustaining a fall with injury, at all the specified intervals required by the licensee's Neurological Status Check policy. The licensee's fall prevention and management program must include the monitoring of residents, and that program must be complied with.

Sources:

Record review with a Manager of Resident Care;

A resident's medical record;

Interview with a Registered Practical Nurse;

Neurological Status Check policy.

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WRITTEN NOTIFICATION: Housekeeping

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

Non-compliance with: O. Reg. 246/22, s. 93 (2) (b) (iii)

Housekeeping

s. 93 (2) As part of the organized program of housekeeping under clause 19 (1) (a) of the Act, the licensee shall ensure that procedures are developed and implemented for,

(b) cleaning and disinfection of the following in accordance with manufacturer's specifications and using, at a minimum, a low level disinfectant in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices:

(iii) contact surfaces;

Hand rails, a high touch surface, were not being cleaned daily in a resident home area during the inspection.

A housekeeper was observed during the inspection cleaning in a resident's room. When asked about the cleaning of high contact surfaces, the housekeeper indicated that hallway railings are not cleaned and disinfected daily. Another housekeeper, a housekeeping supervisor, and the infection prevention and control (IPAC) lead all stated that, as part of their routine practice, hallway railings are to be cleaned and disinfected, at minimum, daily by housekeeping staff.

Sources:

Observation of a housekeeper in a resident home area;

Interviews with a housekeeper, a housekeeping supervisor, and the IPAC manager;

Housekeeping checklist.

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WRITTEN NOTIFICATION: Emergency Plans

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

Non-compliance with: O. Reg. 246/22, s. 268 (8) (b)

Emergency plans

s. 268 (8) The licensee shall ensure that the emergency plans for the home are evaluated and updated,

(b) within 30 days of the emergency being declared over, after each instance that an emergency plan is activated.

The home's outbreak management plan was not reviewed and updated within 30 days of the communicable disease outbreak in the home being declared over in August 2025.

Sources:

The Infection Control Outbreak Management policy;

Interview with the IPAC manager.