

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: March 20, 2025

Inspection Number: 2025-1037-0001

Inspection Type:

Proactive Compliance Inspection

Licensee: CVH (No. 8) LP by its general partner, Southbridge Care Homes (a limited partnership, by its general partner, Southbridge Health Care GP Inc.)

Long Term Care Home and City: Seaforth Long Term Care Home, Seaforth

INSPECTION SUMMARY

The inspection occurred onsite on the following date(s): March 10, 11, 12, 13, 14, 17, 19, 20, 2025

The inspection occurred offsite on the following date(s): March 18, 2025

The following intake(s) were inspected:

- Intake: #00141684 - Proactive Compliance Inspection (PCI)

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

Medication Management
Food, Nutrition and Hydration
Safe and Secure Home
Quality Improvement
Pain Management
Skin and Wound Prevention and Management
Resident Care and Support Services
Residents' and Family Councils
Housekeeping, Laundry and Maintenance Services
Infection Prevention and Control

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

Prevention of Abuse and Neglect
Staffing, Training and Care Standards
Residents' Rights and Choices

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. 85 (3) (c)

Posting of information

s. 85 (3) The required information for the purposes of subsections (1) and (2) is,
(c) the long-term care home's policy to promote zero tolerance of abuse and neglect of residents;

The licensee has failed to ensure that the long-term care home's policy to promote zero tolerance of abuse and neglect of residents was posted in the home. The policy was posted after the home was made aware of the deficiency.

Sources: Observation and an interview with the Executive Director

Date Remedy Implemented: March 11, 2025

NC #002 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: FLTCA, 2021, s. 85 (3) (d)

Posting of information

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

s. 85 (3) The required information for the purposes of subsections (1) and (2) is,
(d) an explanation of the duty under section 28 to make mandatory reports;

The licensee has failed to ensure that the explanation of the duty under section 28 to make mandatory reports was posted in the home. The home posted the required information after the deficiency was noted.

Sources: Observation and interview with the Executive Director

Date Remedy Implemented: March 11, 2025

NC #003 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: FLTCA, 2021, s. 85 (3) (r)

Posting of information

s. 85 (3) The required information for the purposes of subsections (1) and (2) is,
(r) an explanation of the protections afforded under section 30; and

The licensee has failed to ensure that an explanation of whistle-blowing protection was posted in the home. The required information was posted after the deficiency was noted by the home.

Sources: Observation and interview with the Executive Director

Date Remedy Implemented: March 11, 2025

NC #004 remedied pursuant to FLTCA, 2021, s. 154 (2)

Non-compliance with: O. Reg. 246/22, s. 35 (2)

Nursing and personal support services

s. 35 (2) Every licensee of a long-term care home shall ensure that there is a written staffing plan for the programs referred to in clauses (1) (a) and (b).

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

The licensee has failed to ensure that there was a written staffing plan for the organized program of nursing services and the organized program of personal support services. A review of the home's records identified that there was no written staffing plan. After the deficiency was noted, the home developed and provided inspectors with a written staffing plan for nursing and personal support services.

Sources: Interview with the Executive Director and the home's updated staffing plan

Date Remedy Implemented: March 19, 2025

WRITTEN NOTIFICATION: Air Temperature

NC #005 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 24 (1)

Air temperature

s. 24 (1) Every licensee of a long-term care home shall ensure that the home is maintained at a minimum temperature of 22 degrees Celsius.

The licensee has failed to ensure that home was maintained at a minimum temperature of 22 degrees Celsius. Interviews indicated that the home's processes to report temperatures below 22 degrees Celsius was not followed by staff.

Sources: Home area thermostat/thermo-hygrometer readings, the home's policies, temperature and humidity logs, and staff interviews

WRITTEN NOTIFICATION: Air Temperature

NC #006 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

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

Non-compliance with: O. Reg. 246/22, s. 24 (3)

Air temperature

s. 24 (3) The temperature required to be measured under subsection (2) shall be documented at least once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night.

The licensee has failed to ensure that the home's air temperatures were measured and documented in writing once every morning, once every afternoon between 12 p.m. and 5 p.m. and once every evening or night. Interviews indicated that the home's processes to document air temperatures was not followed by staff.

Sources: the home's policies, temperature and humidity logs, and staff interviews

WRITTEN NOTIFICATION: Nursing and Personal Support Services

NC #007 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 35 (4)

Nursing and personal support services

s. 35 (4) The licensee shall keep a written record relating to each evaluation under clause (3) (e) that includes the date of the evaluation, the names of the persons who participated in the evaluation, a summary of the changes made and the date that those changes were implemented.

The licensee has failed to ensure that a written record of the home's 2024 staffing plan evaluation included a summary of changes made and the date those changes were implemented.

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

Sources: Interview with the Executive Director, and review of the home's staffing evaluation.

COMPLIANCE ORDER CO #001 Accommodation services

NC #008 Compliance Order pursuant to FLTCA, 2021, s. 154 (1) 2.

Non-compliance with: FLTCA, 2021, s. 19 (2) (c)

Accommodation services

s. 19 (2) Every licensee of a long-term care home shall ensure that,

(c) the home, furnishings and equipment are maintained in a safe condition and in a good state of repair.

The Inspector is ordering the licensee to prepare, submit and implement a plan to ensure compliance with FLTCA, 2021, s. 19 (2) (c) [FLTCA, 2021, s. 155 (1) (b)]:

The plan must include but is not limited to:

Specifically, the licensee shall prepare, submit and implement a plan to maintain the home, furnishings and equipment to ensure they are kept in a safe condition and in a good state of repair.

A. Complete an audit of all the RHAs including but not limited to; resident rooms/bathrooms, dining rooms, and activity rooms to identify floors, walls, doors, handrails, windows, sinks, ceiling tiles and other areas of disrepair.

B. Complete a checklist of the work to be completed, which includes; where, how, who would be responsible for completing the work, when the work will begin, when it will be completed and how it will be maintained.

C. Ensure that the leadership team participates in creating the plan, including the Executive Director, Maintenance Manager, Environmental Services Manager, and Southbridge Corporate Support.

Please submit the written plan for achieving compliance for inspection #2025-1037-0001 by April 4, 2025. Please ensure that the submitted written plan does not contain any PI/PHI.

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

Grounds

The licensee has failed to ensure that the home was maintained in a safe condition and in a good state of repair.

During observations of home areas of disrepair were noted including chipped paint, scuffed and gouged walls, disrepair of an emergency exit door with corrosion at the bottom, corroded sink drains in two resident rooms, a broken face plate on an outlet, stained ceiling tiles, missing or chipped floor tiles, and loose or missing section of a handrails. Multiple windows in resident rooms would not open and a room was missing all three of the crank handles.

The home's December 2024 and January 2025 Monthly Workplace Inspection reports identified a loose hallway handrail and missing floor tile in a resident room. Both issues had not been repaired at the time of the inspection. The missing floor tile and loose handrail should have been repaired within 24 or 48 hours, respectively, from the time they were identified, as per the home's procedure.

A resident expressed concerns to the home during a resident's council meeting and to an inspector about the condition of the paint in the home.

There was a risk to residents as a result of the disrepair of areas of the home including a trip hazard due to a missing floor tile in a resident room.

Sources: Observations of resident rooms, Resident Council Meeting Minutes, Monthly Workplace Inspection Reports, Maintenance/Repair Plan 2025, and interviews with a Resident, the Maintenance Manager, Executive Director, and other staff.

This order must be complied with by May 26, 2025

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

REVIEW/APPEAL INFORMATION

TAKE NOTICE The Licensee has the right to request a review by the Director of this (these) Order(s) and/or this Notice of Administrative Penalty (AMP) in accordance with section 169 of the Fixing Long-Term Care Act, 2021 (Act). The licensee can request that the Director stay this (these) Order(s) pending the review. If a licensee requests a review of an AMP, the requirement to pay is stayed until the disposition of the review.

Note: Under the Act, a re-inspection fee is not subject to a review by the Director or an appeal to the Health Services Appeal and Review Board (HSARB). The request for review by the Director must be made in writing and be served on the Director within 28 days from the day the order or AMP was served on the licensee.

The written request for review must include:

- (a) the portions of the order or AMP in respect of which the review is requested;
- (b) any submissions that the licensee wishes the Director to consider; and
- (c) an address for service for the licensee.

The written request for review must be served personally, by registered mail, email or commercial courier upon:

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th floor
Toronto, ON, M7A 1N3

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

e-mail: MLTC.AppealsCoordinator@ontario.ca

If service is made by:

- (a) registered mail, is deemed to be made on the fifth day after the day of mailing
- (b) email, is deemed to be made on the following day, if the document was served after 4 p.m.
- (c) commercial courier, is deemed to be made on the second business day after the commercial courier received the document

If the licensee is not served with a copy of the Director's decision within 28 days of receipt of the licensee's request for review, this(these) Order(s) is(are) and/or this AMP is deemed to be confirmed by the Director and, for the purposes of an appeal to HSARB, the Director is deemed to have served the licensee with a copy of that decision on the expiry of the 28-day period.

Pursuant to s. 170 of the Act, the licensee has the right to appeal any of the following to HSARB:

- (a) An order made by the Director under sections 155 to 159 of the Act.
- (b) An AMP issued by the Director under section 158 of the Act.
- (c) The Director's review decision, issued under section 169 of the Act, with respect to an inspector's compliance order (s. 155) or AMP (s. 158).

HSARB is an independent tribunal not connected with the Ministry. They are established by legislation to review matters concerning health care services. If the licensee decides to request an appeal, the licensee must give a written notice of appeal within 28 days from the day the licensee was served with a copy of the order, AMP or Director's decision that is being appealed from. The appeal notice must be given to both HSARB and the Director:

Health Services Appeal and Review Board

Attention Registrar

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

151 Bloor Street West, 9th Floor
Toronto, ON, M5S 1S4

Director

c/o Appeals Coordinator
Long-Term Care Inspections Branch
Ministry of Long-Term Care
438 University Avenue, 8th Floor
Toronto, ON, M7A 1N3
e-mail: MLTC.AppealsCoordinator@ontario.ca

Upon receipt, the HSARB will acknowledge your notice of appeal and will provide instructions regarding the appeal and hearing process. A licensee may learn more about the HSARB on the website www.hsarb.on.ca.