



Ministry of Health and Long-Term Care

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

Ministère de la Santé et des Soins de longue durée

Rapport d'inspection prévue le Loi de 2007 les foyers de soins de longue

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

Ottawa Service Area Office
347 Preston St, 4th Floor
OTTAWA, ON, K1S-3J4
Telephone: (613) 569-5602
Facsimile: (613) 569-9670

Bureau régional de services d'Ottawa
347, rue Preston, 4ième étage
OTTAWA, ON, K1S-3J4
Téléphone: (613) 569-5602
Télécopieur: (613) 569-9670

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Table with 3 columns: Date(s) of inspection, Inspection No, Type of Inspection. Row 1: Oct 22, 25, 2012; 2012\_195166\_0003; Follow up

Licensee/Titulaire de permis

OMNI HEALTH CARE LIMITED PARTNERSHIP
1840 LANSDOWNE STREET WEST, UNIT 12, PETERBOROUGH, ON, K9K-2M9

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

SPRINGDALE COUNTRY MANOR
2698 CLIFFORD LINE, R. R. #5, PETERBOROUGH, ON, K9J-6X6

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

CAROLINE TOMPKINS (166)

Inspection Summary/Résumé de l'inspection

The purpose of this inspection was to conduct a Follow up inspection.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Director of Care, members of the Registered nursing staff and Personal Support Workers.

During the course of the inspection, the inspector(s) reviewed residents' clinical health records and written plans of care relating to the management of responsive behaviours.

The following Inspection Protocols were used during this inspection:

Responsive Behaviours

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



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Telephone: 613-569-5602  
1-877-779-5559  
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<b>Date(s) of inspection/Date de l'inspection</b> Oct 22, 25, 2012	<b>Inspection No/ No de l'inspection</b> 2012_195166_0003	<b>Type of Inspection/Genre d'inspection</b> Follow up
<b>Licensee/Titulaire de permis</b> OMNI HEALTH CARE LIMITED PARTNERSHIP 1840 LANSDOWNE STREET WEST, UNIT 12, PETERBOROUGH, ON, K9K-2M9		
<b>Long-Term Care Home/Foyer de soins de longue durée</b> SPRINGDALE COUNTRY MANOR 2698 CLIFFORD LINE, R. R. #5, PETERBOROUGH, ON, K9J-6X6		
<b>Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs</b> # 166		

**THE FOLLOWING NON-COMPLIANCE AND/OR ACTION(S)/ORDER(S) HAVE BEEN COMPLIED WITH/  
LES CAS DE NON-RESPECTS ET/OU LES ACTIONS ET/OU LES ORDRES SUIVANT SONT MAINTENANT  
CONFORME AUX EXIGENCES:**

*(Please delete empty rows. Ensure the signature box is on the same page as the last row of corrected requirement.)*

<b>REQUIREMENT/ EXIGENCE</b>	<b>TYPE OF ACTION/ORDER #/ GENRE DE MESURE/ORDRE NO</b>	<b>INSPECTION # / NO DE L'INSPECTION</b>	<b>INSPECTOR ID #/ NO DE L'INSPECTEUR</b>
O. Reg. 79/10, s. 53 (4).	Compliance Order # 901	2012_195166_0034	#166

Issued on this the 25 day of October , 2012

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

*J. McPauland for C. Tompkins*